STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966350	12/01/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Dr Phillips Assisted Living Facility, Inc	5412 Palm Lake Circle Orlando, FL 32819	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0008 - 58a-5.0181(2) Fac - Admissions - Health Assessment S-S= D
St - A - 0010 - 58a-5.0181(4) Fac - Admissions - Continued Residency S-S= D
St - A - 0030 - 58a-5.0182(6) Fac; 429.28 Fs - Resident Care - Rights & Facility Procedures S-S= D
St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D
St - A - 0083 - 58a-5.0191(4) Fac - Training - First Aid And S-S= D
St - A - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards S-S= D
St - A - 0162 - 58a-5.024(3) Fac - Records - Resident S-S= D

Specific Tag Findings:
0000-Initial Comments
Re-licensure survey with Limited Nursing Services (LNS) was conducted on Dr Phillips Assisted Living Facility had deficiencies found at the time of the visit.

0008-Admissions - Health Assessment 58A-5.0181(2) FAC
Based on record review and interview the facility failed to ensure the health assessment contained all required information for 1 of 2 sampled resident records (#2).

Findings:

Resident record review for resident #2 on at approximately 1:30 PM revealed that she was admitted to the facility on Continued review revealed an updated health assessment report dated The assessment did not address the resident's needs regarding assistance with self-administration of medications.

In an interview with the administrator on at approximately 2:30 PM who stated the information had been overlooked.

Class III

0010-Admissions - Continued Residency 58A-5.0181(4) FAC
Based on record review and interview the facility failed to ensure that as part of the continued residency 1 of 2 sampled residents (#2) who experienced a significant change, had a face-to-face medical examination by a health care provider when he was admitted to hospice services and failed to maintain a hospice interdisciplinary care plan to ensure the coordination of care and services.

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Findings:

Resident record review on [redacted] at approximately 1:30 PM revealed that resident #2 was admitted to hospice on [redacted] Continued review revealed that an updated health assessment report 1823 was not available for review. The assessment available for review was dated [redacted] which was prior to the admission to hospice. Further review revealed that a hospice interdisciplinary care plan was not available.

In an interview with the administrator on [redacted] at approximately 2:30 PM who stated the assessment was overlooked.

Class III

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS
Based on record review and interview the facility failed to ensure the use of physical restrains was limited to half-bed rails only for 1 of 2 sampled residents (#2).

Findings:

Observations during the facility tour on [redacted] at approximately 8:45 AM, noted resident's #2 bed had half-bed rails on the bed. The resident was in the common area. She sat in a high back wheelchair and had a lap tray across her lap. The resident was [redacted] and constantly stated "Oh Lord. Oh Lord " I' m hungry". Staff B stated the resident was under the care of hospice.

Resident record review on [redacted] at approximately 1:30 PM revealed a health assessment dated [redacted] that listed diagnoses of [redacted] A health care provider's order dated [redacted] indicated half-bed rail. Continued review revealed no evidence to confirm the half-bed rail order was revised annually due [redacted]

In an interview with the administrator on [redacted] at approximately 2:30 PM who stated she was not aware the half-bed rail needed to be updated and since the resident was under hospice she thought the tray was not a problem. She removed it.

Class III

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0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC
Based on observations the facility failed to ensure the unlicensed staff that assisted 1 of 2 sampled residents (#1) with self-administration of medications followed the correct procedure.

Findings:

Observations of the medication pass on at approximately 9 AM noted, staff B opened the medication cart, put some pills in a plastic cup and handed the cup to the resident. She left the cup with pills inside the medication cart and went to a resident's She returned and stated the resident did not want the medication now. At approximately 12:15 PM on during lunch she offered the resident her medications. The resident agreed. The staff brought the cup which she previously filled and gave it to the resident. She proceeded to tell the resident this is this is for and for and for and She observed the resident take the medication and then signed the Medication Observation Record.

During the medication reconciliation on at approximately 1 PM the staff stated and provided the following medications 600 plus- over the counter , 423 milligrams (mg), 1000 Units, 20 mg, 10 mg and 50 mg as the medication in the cup.

In an interview with the administrator on at approximately 3 PM she stated would speak with the staff.

Class III

0083-Training - First Aid and 58A-5.0191(4) FAC
Based on personnel record review and interview the facility failed to have evidence that a staff member who held a currently valid card that documented the completion courses in First Aid was in the facility at all times when residents were present.

Findings:

During the facility tour on at approximately 8:45 AM staff B stated she was alone with the residents and would call the administrator. The administrator arrived shortly after.

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Staff schedule review for the weeks of [redacted] and [redacted] revealed staff B was the sole caregiver between 7 PM to 7 AM Monday thru Friday.

Personnel record review on [redacted] at approximately 2 PM for staff B revealed the First Aid certification expired on [redacted].

In an interview with the administrator on [redacted] at approximately 2:30 PM, she stated staff B had completed a First Aid course and forgot to get the card. Staff B stated when she renewed her [redacted]; she did not take First Aid because at that time it was still valid. She then stated she forgot to get the card. An opportunity was given to contact the trainer and get a card; but she stated she was unable to recall who the trainer was.

Class III

0093-Food Service - Dietary Standards 58A-5.020(2) FAC
Based on observations and interview the facility failed to maintain a 3-day supply of non-perishable foods that included enough vegetables to be used in the event of an emergency.

Findings:

During the facility tour on [redacted] at approximately 8:30 AM staff #A stated the facility census was 4 residents.

Observations of the facility's emergency food supply at approximately 1:30 PM noted there were 90.5 ounces of canned vegetables available to use in the event of an emergency. Based on a census of 4 and the 3 meals contracted to be provided the facility needed 144 ounces (4 residents x 12 ounces x 3 days = 144) and 105 ounces were available.

Review of the resident contract at approximately 2 PM revealed the facility would provide 3 meals a day.

In an interview with the administrator on [redacted] at approximately 1:45 PM who agreed that more long life (can) vegetables were needed but she thought the frozen vegetables could be

counted towards the emergency supply. There were no other can vegetables than the 90.5 ounces.

Class III

0162-Records - Resident 58A-5.024(3) FAC
Based on observations, record review and interview the facility failed to ensure that 1 of 2 sampled residents (#2) who received assistance with self-administered medications from unlicensed staff, had a signed informed consent form that indicated whether the unlicensed staff would or would not be supervised by a nurse.

Findings:

Record review for resident #2 on [redacted] at approximately 1:30 PM revealed an informed consent form regarding assistance with self-administration of medications from unlicensed staff. The form did not indicate whether the unlicensed staff would or would not be supervised by a nurse: it was left blank.

In an interview with the administrator on [redacted] at approximately 2:30 PM who stated the information had been overlooked.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Dr Phillips Assisted Living Facility, Inc
5412 Palm Lake Circle
Orlando, FL 32819

RE: Biennial relicensure w/LNS

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on 2014 by representative(s) of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after **01/09/2015** to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor(s). Should you have any questions please call Lorraine Henry at .

Sincerely,

Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure

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