AGENCY FOR HEALTH CARE ADMINISTRATION

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966911	**03/05/2015**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
SMALLVILLE	**10144 BROWNWOOD AVENUE ORLANDO, FL 32825**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

The biennnial re-licensure survey was conducted on . . . . . Smallville had deficiencies found at the time of the visit.

0008 - Admissions - Health Assessment - 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on record review and interview the facility failed to ensure that 2 of 2 sampled residents records reviewed had a completed health assessment that addressed all the required criteria (#1 and #5).
Findings:
Resident record review for resident #1 revealed a health assessment report AHCA form 1823 was not dated.
Continued review revealed the assessment did not indicate the resident's dietary needs. That portion of the form was blank
Resident record review for resident #5 revealed she was admitted to the facility . . . . . Continued review revealed an updated health assessment AHCA form 1823 dated . . . . . did not address the resident's needs with activities of daily living. That portion of the form was blank.
In an interview with the administrator on . . . . . at approximately 3 PM, who stated the assessments were overlooked.
Class III

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on observations, record review and interview the facility retained 1 of 3 sampled residents (#6) who was unable to transfer and exceeded residency in the ALF.
Findings:
Observations during the facility tour on . . . . . at approximately 9:15 AM noted resident #6 was in her . . . . . a recliner.
In an interview with resident #6 on . . . . . at approximately 10 AM who stated "I cannot walk. I eat in my . . . . . I learned to dress and do everything else in the bed. They put me in the recliner. I eat here, it's too much trouble to transfer." When the resident was asked about her ability to transfer. She stated she was unable to, her legs "are . . . . . from the knees down". If "I need to go out my daughter in law makes arrangements for that. I will be in the wheelchair and they put me in the bus, roll me to the apartment and roll me back. I have what I need. I just can't walk."
Resident record review revealed a health assessment report 1823 dated . . . . . that indicated the resident needed assistance with dressing, ... toileting, transferring and ambulation.
In an interview with the administrator on . . . . . at approximately 3 PM who confirmed the resident was unable to pivot or transfer.
Class III

0052 - Medication - Assistance with Self-Admin - 58A-5.0185(3) FAC

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Based on observations the facility failed to ensure the unlicensed staff who assisted with self-administration of medications followed the correct procedure when she provided assistance with self-administration to 2 of 2 sampled residents (#1 and #3).
Findings:
Observations on ... at approximately 12 PM during the medication pass noted that staff B retrieved a large pill organizer from the medication cabinet. She quickly took 4 pills and put them in a cup. The pills were 1 pink large pill, 1 brown pill, 1 gel like yellow pill and a small yellow- gel- like pill. She took the medications to resident #1. The staff put the medications in a napkin and watched the resident take the medication.
The pill organizer had slots for all 7 days of the week and morning, afternoon and evening slots as well. The Thursday evening slot had 3 pills inside (1 large white, 1 round white and a half pink tablet). Friday AM had 4 pills inside (1 large white, 1 small red, 1/2 pink and 1 white oval)
The back of the organizer had a hand written label that indicated {name} pills:
AM: 100 milligram (mg),Ve ER 120 mg, Iron 25 mg
Lunch: 20 mg. D3, ... 220 mg and MTV
Diner: Levateracetram 100 mg and 81 mg
The label was dated 31 ... 12 ...

She then assisted resident #3 in the following manner: staff #B put the pills in a cup, while she was in the kitchen, preparing the medications for resident #1, she brought the cup to resident #3. She put the pills in the resident's hands and observed the resident take the medication.
In an interview on at approximately 2 PM with the administrator, who stated he did not know that the staff could not use a pill organizer; the resident's brother filled the organizer.
Class III

0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC

Based on observations and interview the facility failed to ensure medications were kept in a locked cabinet, locked cart, or other locked storage receptacle, or area at all times, out of sight of all residents.
Findings:
Observations during a resident interview on ... at approximately 11AM with resident #5 noted an ... pen on top of the resident's dresser. "I am a ... c-can't have no sugar. I'm on ... I use ... 12 U- Lantus ... I keep it in my ... She added she self- administer, 2 inhalers and 2 other medications that needed to be refrigerated ... inhaler and pro air inhaler. She added she did not lock her ... The ... pen did not have a prescription label.
Observations on ... at approximately 12 PM noted resident #5 went to the dining ... lunch. Her ... was not locked.
The surveyor inquired about the resident's ... box. The staff went in a staff ... the back of the house where she retrieved the ... box with the prescription label. She stated she kept the extra medications in her ... She walked away and did not lock the ...
In an interview on at approximately 3 PM with the administrator, who stated the staff normally kept the ...

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locked and confirmed resident #5 did not lock the when she went out.
Class III

0076 - - 58A-5.0186 FAC

Based resident record review and interview the facility failed to have accurate written policies and procedures, which delineated its position with respect to state laws and rules relative to for 1 of 3 sampled residents (#1, #5 and #6).
Findings:
Record review for residents #1, #5 and #6 revealed the facility provided them with the following policy: The facility would honor the resident's wishes and their record would have a special decal to identify the residents with a The policy indicated to "please note that a does not mean the staff will allow any resident who was in distress from an incident to go without assistance. In such instances staff will initiate or First aid until the emergency personnel arrive. They will be provided with the and at that time they will decide if to continue with or First Aid".
Continued review revealed the policy did not include the following provision:
(3) PROCEDURES. Pursuant to Section 429.255, F.S., an ALF must honor a properly executed as follows:
a) In the event a resident experiences or staff trained in or a health care provider present in the facility, may withhold compression, and
b) In the event a resident is receiving hospice services and experiences facility staff must immediately contact the hospice. The hospice procedures shall take precedence over those of the assisted living facility.
In an interview with the administrator on at approximately 3 PM who confirmed the findings and added he had no additional documentation.
Class III

0080 - Training - Core & Competency Test - 429.52(1-2) FS; 58A-5.0191(1) FAC

Based on personnel record review and interview the administrator failed to have evidence of 12 hours of continuing education in topics related to Assisted Living every 2 years.
Findings:
Personnel record review on for staff # A (the administrator) revealed there was no documentation to confirm that she had completed 12 hours of continuing education in topics related to Assisted Living every 2 years. The review revealed he attended 10 hours of continuing education.
In an interview on at approximately 3 PM with the administrator, who stated he needed 2 more hours of continuing education.
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0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(5) FAC

Based on record review and interviews the facility failed to ensure 1 of 3 unlicensed staff (#C) who provided assistance with self-administered medications completed a 2 hour continuing education class on proving assistance with self -administration of medications.
Findings:
In an interview with staff #C on [redacted] at approximately 11:30AM, who stated she assisted the residents with self -administration of medications and had taken the necessary classes.
Personnel record review for staff # C revealed she was hired [redacted] 2014. Continued review revealed a certificate dated [redacted] that indicated she attended the initial 4 hours of training regarding the provision of assistance with self-administration of medications. However, there was no evidence to confirm she attended 2 hours of continuing education yearly thereafter.
In an interview with the administrator on [redacted] at approximately 3 PM, who stated the staff worked at another facility and had taken the training but did not bring in the certificates.
Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(6) FAC

Based on record review and interview the facility failed to ensure the person in charge of food services (staff #A) completed 2 hours of continuing education annually in topics pertinent to nutrition and food service.

Findings:

In an interview on [redacted] at approximately 1 PM with staff A, who stated he was the person responsible for the facility's food service.

Personnel record review staff #A (the administrator) revealed that there was no documentation to confirm that he had completed 2 hours of continuing education annually regarding nutrition and food service in an assisted living facility.

In an interview on [redacted] at approximately 3 PM with the administrator, who stated he needed to obtain the continuing education requirements.
Class III

0090 - Training - [redacted] - 58A-5.0191(11) FAC

Based on interview and record review the facility failed to ensure 2 of 3 sampled staff (#B and C) received an in-service training regarding the facility's [redacted] that included all the information in Rule 58A-5.0186, F.A.C.
Findings:
In an interview with staff #B on [redacted] at approximately 10:45 AM who stated she had been trained regarding

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. She stated if the resident was under the care of hospice she would do compressions and call the administrator. If the resident had orders, she would give compressions and call the administrator. If the resident was and had no pulse she would not give and would call the administrator.
In an interview with staff #C on at approximately 11:30 AM who stated she did not know what meant.
Personnel record review for staff # B revealed she was hired . Continued review revealed a certificate dated that indicated an in-service training regarding the facility's policies and procedures.
Personnel record review for staff # C revealed she was hired 2014 .Continued review revealed a certificate dated to confirm she received an in-service training regarding the facility's policies and procedures.
In an interview with the administrator at approximately 3 PM, who stated the staff had been trained regarding and most likely became nervous during the interview.
Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on observations and interviews the facility failed to ensure that a 3-day supply of nonperishable food, that included long shelve life milk, based on the number of weekly meals the facility had contracted with residents to serve, was on hand at all times.
Findings:
During the facility entrance on at approximately 8:45 AM, staff #B stated the census was 6 residents.
Observations of the emergency food supply on at approximately 1 PM noted that the facility had no long-shelve life milk.
Resident records review for residents #1, 5 and 6 revealed the contract indicated the facility was contracted to provide 3 meals daily.
Based on a census of 6 residents the facility needed 9 quarts of milk (6 x 3 x .50 quart) on hand and available at all times.
In an interview with the administrator at approximately 1 PM, who stated the shopping had to be done and milk was needed.
Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on personnel record review and interview the facility failed to ensure 1 of 3 personnel records (# C) contained an employment application and freedom from communicable statement.
Findings:
Personnel record review for staff #C hired revealed that an application for employment was not available for review. Continued review revealed no evidence to confirm the facility obtained a statement from a health care provider within 30 days of hire that indicated she was free from communicable including .
In an interview with the administrator on at approximately 3 PM , who stated he thought the staff had filled out an application, maybe she did not bring it back to him and she needed the statement from the doctor.

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Class III

0162 - Records - Resident - 58A-5.024(3) FAC

Based on observations, record review and interview the facility failed to ensure 2 of 3 sampled resident records (#5 and #6) contained all the required documentation.
Findings:
Observations during the medication pass on at approximately 12 PM, noted that staff #B assisted residents with self-administration of medications.
Personnel record review for staff A, B and C revealed they were not nurses.
Record review for resident #5 reveled and informed consent regarding assistance with self-administration of medications dated that did not indicate if the staff providing such assistance would be or not supervised by a nurse.
In an interview with resident #6 on at approximately 10 AM who stated "They help me with my medicines. I take my pain pills since it's 3 x daily, I keep them in my I make sure I take them for the pain in my legs and back."
In an interview with resident #5 on at approximately 11 AM who stated "I am a c-can't have no sugar. I'm on I use 12 U- Lantus -I kept it in she also self-administered 2 inhalers-C inhaler and Pro-air inhaler.
Resident record review for resident # 5 revealed a health assessment that indicated she needed assistance with self- administration of medications. Continued review revealed no evidence to confirm a healthcare provider's order that allowed the resident to manage and self-administer and the 2 inhalers.
Resident record review for resident # 6 revealed a health assessment 3/0: that indicated she needed assistance with self- administration of medications. Continued review revealed no evidence to confirm a healthcare provider's order that allowed for the resident to manage and self-administer (pain medication).
In an interview with the administrator on at approximately 3 PM, who stated he was no aware that an order was needed to allow residents to self -administer medications was needed.
Class III

0167 - Resident Contracts - 58A-5.025 FAC

Based on record review and interviews the facility failed to ensure the resident contract for 1 of 3 sampled residents (#5) contained all the required components.

Findings:

Resident record review for resident #5 revealed the contract dated did not indicate the daily, weekly or monthly rate.

In an interview with the administrator on at approximately 3 PM, who stated the contact was overlooked.

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Class

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Smallville
10144 Brownwood Avenue
Orlando, FL 32825

RE: Biennial relicensure

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2015 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 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
XG90

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