RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Good Samaritan Retirement Home
507 S.E. 1st Avenue
Williston, FL 32696

RE: CCR #2015003633 & 2015004477

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2015 by a representative of this office.

Enclosed 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. **Please attach your corrective action and any additional documentation to support correction of identified deficiencies and send to the Field Office no later than , 2015.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiencies identified on your survey, which may include a desk review or onsite revisit.

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. Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Krista J. Mennella
Field Office Manager

KJM/amw
Enclosure

Alachua Field Office
14101 N W Hwy 441, Suite 800
Alachua, FL 32615-5669
Phone:(386) 462-6201; Fax:(386) 418-5300
AHCA.MyFlorida.com

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910275	**07/06/2015**
NAME OF PROVIDER OR SUPPLIER **GOOD SAMARITAN RETIREMENT HM**	STREET ADDRESS, CITY, STATE, ZIP CODE **507 S.E. 1ST AVENUE** **WILLISTON, FL 32696**	

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

Class III

0167 Resident Contracts

Based on record review and interview, the facility failed to ensure 2 of 4 (Resident #1, Resident #4) sampled residents' files contained fully executed contracts for services with the facility.

Findings:

Record review of resident contracts for Resident #1 and #4 failed to reveal documentation of fully executed contracts. Record review of Resident #1 ' s Resident Service Agreement revealed the contract had not been signed and fully executed by Resident #1. Record review of Resident 4's Resident Service Agreement dated revealed a representative of the facility had failed to sign and fully execute the Resident Service Agreement.

During interview on at 2:24 PM, the facility Manager confirmed that Resident #1 and Resident #4 did not currently have fully executed contracts on file with the facility.

Class III

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SUMMARY STATEMENT OF DEFICIENCIES
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0000 Initial Comments

Unannounced complaint surveys (CCR#2015003633 and CCR#2015004477) were completed on 06, 2015 at Good Samaritan Assisted Living Facility. Deficient practice was identified at the time of the survey.

0084 Trainina - Assis Self-Admin Meds & Med Mamt

Based on record review and interview, the facility failed to ensure 2 of 3 (Employee B, Employee C) sampled unlicensed staff providing assistance with self administration of medications completed annual update training as required.

Findings:

Record review of employee files for Employee B and Employee C revealed Medication Update training for Employee B and Employee C had expired on

During interview on at 1:27 PM, the facility Manager confirmed Employee B and Employee C had not completed annual update training in the area of self administration as required.

0161 Records - Staff

Based on record review and interview the facility failed to ensure completed employee files were available on site for review during the survey investigation for 3 of 3 (Employee A, Employee B, Employee C) sampled employees.

Findings:

Record review of employee files for Employee A, Employee B and Employee C revealed training documents were missing from these employees files. Employee A's file was not available for review on site at the facility at the time of the survey. The facility was unable to locate Neglect, or Level I training for Employee B at the time of the survey. The facility was unable to locate a job description, training or Level I training for Employee C at the time of the survey.

During interview on at 1:04 PM, the facility Manager confirmed Employee A's personnel file was not on site at the facility and he was unable to locate the missing training documents for Employee B and Employee C.