STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910416	08/05/2015
NAME OF PROVIDER OR SUPPLIER **SWANKRIDGE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **122 NW 7 STREET** **HOMESTEAD, FL 33030**	

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

0000 Initial Comments

An Abbreviated Biennial Survey was conducted on . Swankridge, Inc. with a standard license had the following deficiencies found at the time of the survey.

0078 Staffing Standards - Staff

Based on record review and interview the facility's personnel records did not have documentation verifying proof of freedom from communicable for two out of five (D and E) sampled staff. The facility failed to have evidence of negative examinations documented on an annual basis for three out of five (A, B, and C) sampled staff.

Findings included:

On at 10:30 AM employee record review revealed sampled Staff A's freedom from communicable statement expired , Staff B's expired , and Staff C's expired . The facility failed to have evidence of negative examinations documented on an annual basis for Staff A, B, and C. Record review found Staff D (Hired /) and Staff E (Hired) did not have documentation verifying proof of freedom from communicable .

On at 1:00 PM the owner stated she thought that she had enough time to correct them, but she did not know that AHCA was going to do the survey early.

Class III

0081 Training - Staff In-Service

Based on observation, record review, and interview the facility did not ensure that two out of five sampled staff (Staff D and E) received control, ADLs and behavioral needs, Elopement, Emergency Preparedness and Evacuation, Incident Report, Resident Rights, Recognizing/Reporting , Neglect & , Nutritional & Safe Food Handling training prior to provide any personal/ direct care to residents.

Findings included:

On at 10:47 AM record review revealed that Staff D (Hired on /) and Staff E(Hired on) were employees working at the facility at the time of the survey. The staff members did not have the following: control, ADLs and behavior needs, Elopement, Emergency Preparedness

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and Evacuation, Incident Report,, Resident Rights, Recognizing/ Reporting , Neglect & , , Nutritional & Safe Food Handling training prior to provide any personal/direct care to residents.

On at 1:00 PM the owner stated she thought that she had enough time to correct them, but she did not know that AHCA was going to do the survey early.

Class III

0082 Training - HIV/AIDS

Based on record review and interview the facility failed to provide documentation of providing an education course on and for two out of five sampled staff (Staff D and E).

Findings included:

On at 10:47 AM record review reveal that Staff D (Hired on /) and Staff E(Hired on) did not have and training within 30 days. Staff was taking care of the resident at the time of the survey.

On at 1:00 PM the owner stated she thought that she had enough time to correct them, but she did not know that AHCA was going to do the survey early.

Class III

0083 Training - First Aid and

Based on record review and interview the facility's personnel records did not include evidence of First Aid and training for two out of five (Staff D and E) sampled staff.

Findings included:

On at 10:47 AM record review revealed that Staff D (Hired on /) and Staff E(Hired on) did not have First Aid and training. Both employees working at the facility at the time of the survey

On at 1:00 PM the owner stated she thought that she had enough time to correct them, but she did not know that AHCA was going to do the survey early.

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Class III

0084 Trainina - Assis Self-Admin Meds & Med Mamt

Based on record review, and interview the facility failed to ensure five out of five (Staff A, B, C, D, E) sampled staff to have the initial 4/hours and 2/hours training for assistance with self-administration of medications.

Findings included:

On at 10:47 AM record review reveal Staff A's last training was dated /, Staff B's last training was dated , and Staff C's last training was dated . The facility did not have documentation that the staff members received 2 hours of medication training annually.

Record review revealed Staff D (Hired on /) and Staff E (Hired on) did not have the initial 4/hours training to assist residents with self-administration of medications.

On at 1:00 PM the owner stated she thought that she had enough time to correct them, but she did not know that AHCA was going to do the survey early.

Class III

0085 Trainina - Nutrition & Food Service

Based on record review and interview the facility failed to ensure one out of five (Staff C) sampled staff had minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility.

Findings included:

On at 10:47 AM record review revealed Staff C's last training was dated . The facility did not have documentation that the staff member received 2 hours of nutrition and safe food training.

On at 1:00 PM the owner stated she thought that she had enough time to correct them, but she did not know that AHCA was going to do the survey early.

Class III

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0086 Training - ADRD

Based on record review and interview the facility failed to ensure two out of five (Staff D and E) staff received and Related (ADRD) training.

Findings included:

On at 10:47 AM record review revealed that Staff D (Hired on /) and Staff E(Hired on) did not have the training level I (ADRD) on the record. Staff was taking care of the resident at the time of the survey.

On at 1:00 PM the owner stated she thought that she had enough time to correct them, but she did not know that AHCA was going to do the survey early.

Class III

0160 Records - Facility

Based on record review and interview the facility failed to have an Emergency Management Plan.

Findings included:

On at 8:40 AM observed the facility did not have an Emergency Management Plan.

On / at 1:00 PM the owner stated she thought that she had enough time to correct them, but she did not know that AHCA was going to do the survey early.

Class III

Z815 Background Screening: Prohibited Offenses

Based on record review and staff interview the facility failed to ensure that one out of five (Staff E) sampled staff members have a completed level 2 background screening prior to providing care to residents.

Findings included:

On Staff E was working in the facility caring for residents at the time of the survey.

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On at 10:47 AM, employee record review revealed that Staff E (hired on date) did not have a completed level 2 background screening.

On at 9:52 AM Staff E stated "I have been working in this facility for over 8 months."

The background screening website was checked, Staff E did not have a completed level 2 background screening.

Unclassified

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Swankridge, Inc
122 Nw 7 Street
Homestead, FL 33030

Dear Administrator:

This letter reports the findings of an Abbreviated Biennial 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. **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(s). Should you have any questions please call Verlande Exil, Health Facility Evaluator Supervisor at (305) 593-3100.

Sincerely,

Arlene Mayo-Davis, RN
Field Office Manager

AMD:ve
Enclosure
XG90

Miami Field Office
8333 N.W. 53rd Street, Suite 300
Miami, FL 33166
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