AGENCY FOR HEALTH CARE ADMINISTRATION

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910251	12/14/2015
NAME OF PROVIDER OR SUPPLIER **INDIAN OAKS MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **11355 131ST STREET N** **LARGO, FL 33774**	

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

0000 Initial Comments

Assisted Living Facility

A complaint investigation (CCR #2015010500) was conducted at Indian Oaks Manor on / . Indian Oaks Manor had deficiencies at the time of the investigation.

0081 Training - Staff In-Service

Based on record review and interview, three of four dietary staff sampled (K; L; M) who had been employed at least 30 days, had not received the 1 hour in-service in safe food handling practices.

Findings included:

A personnel file review during the investigation revealed that Staff K (hired /), Staff L (hired /) and Staff M (hired /) did not have any documentation verifying that they had obtained the 1 hour in-service in safe food handling practices. Interview with the administrator at 10:20am on / indicated that these three individuals were dietary staff/servers and further interview at 1:00pm found that their food handling certifications were unavailable for inspection.

Class III

0084 Training - Assis Self-Admin Meds & Med Mgmt

Based on record review and interview, two of nine direct care staff sampled (C; H) who had been employed at least 30 days and who assisted residents with medication self-administration as part of their duties had either a) not received the initial 4 hour training in this area and/or b) had not obtained the 2 hour update in safe medication practices on an annual basis.

Findings included:

A personnel file review on / found that although Staff C had taken the / 4 hour medication assistance training, further review of the record found no evidence that a 2 hour update in medication practices/related topics had been obtained. Review of Staff H's file revealed no medication training certification at all. Interview with the administrator at 1:20pm on indicated that the documentation of medication training for both employees was not available for inspection.

Class III

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RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Indian Oaks Manor
11355 131st Street N
Largo, FL 33774

RE: CCR #2015010500

Dear Administrator:

This letter reports the findings of a complaint 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 a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents 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 Paul Brown, HFES at (727) 552-2000.

Sincerely,

for Patricia Reid Caufman
Field Office Manager

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