AGENCY FOR HEALTH CARE ADMINISTRATION

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966353	03/18/2016
NAME OF PROVIDER OR SUPPLIER **VILLAS AT SUNSET BAY**	STREET ADDRESS, CITY, STATE, ZIP CODE **7423 KAUAI LOOP** **NEW PORT RICHEY, FL 34653**	

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

0000 Initial Comments

ASSISTED LIVING FACILITY

On 18. 2016, a biennial relicensure survey with extended congregate care (ECC) services was conducted at Villas at Sunset Bay Assisted Living Facility. Deficiencies were identified at the time of the survey

0078 Staffing Standards - Staff

Based on record review and interview, the facility did not receive a written statement from a health care provider documenting the staff does not have any signs or symptoms of communicable within thirty (30) days of hire for 3(#A, #B & #C) of 3 direct care staff who were sampled for communicable statements.

Findings included:

A Record review on of staff #A's personnel file revealed she was hired on and the communicable statement was dated /. This was five (5) months after she had been hired.

A Record review on / of staff #B's personnel file revealed she was hired on and the communicable statement was dated /. This was eight (8) months after staff #B had been hired. Staff #A had thirty (30) days to give the communicable statement to the facility.

A Record review on of staff #C's personnel file revealed he was hired on and the communicable statement was dated . This was nine (9) months after staff #C had been hired.

When interviewed on at 2:00 pm, the administrator verified the communicable statements for staff #A, staff #B and staff #C were not received by the facility within the thirty (30) days of hire time frame.

Class III

0081 Training - Staff In-Service

Based on record review and interview, the facility did not provide the required direct care staff training

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within thirty (30) days of hire for 1(#A) of 3 direct care staff sampled for direct care training.

Findings included:

A Record review on of staff #A's personnel file revealed she was hired on and the following trainings were not done within the thirty (30) days of hire time frame:
1. Reporting major incidents.
2. Reporting adverse incidents.
3. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation.
4. Resident rights in an assisted living facility.
5. Recognizing and reporting resident , neglect, and .
6. Safe food handling practices.
7. The facility's resident elopement response policies and procedures.

Record review of staff #A's training certificates revealed some were dated and others were dated . This was six (6) months after the date of hire.

The administrator on at 2:05 pm verified the dates of the trainings were past the required thirty (30) days of hire time frame.

Class III

0082 Training - / /

Based on record review and interview, the facility did not provide the required / training for direct care staff within thirty (30) days of hire for 1(#A) of 3 direct care staff sampled for / training.

Findings included:

A Record review on of staff #A's personnel file revealed staff #A was hired on and the / training was completed at the facility on . The training was completed five (5) months after staff #A was hired.

The administrator on at 2:10 pm verified the date on the / training certificate as five (5) months after staff #A was hired.

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Class III

0090 Training -

Based on record review and interview, the facility did not provide the training on the facility's policies and procedures regarding ( ) for direct care staff within thirty (30) days of hire for 1(#A) of 3 direct care staff sampled for training..

Findings included:

A Record review on of staff #A's personnel file revealed staff #A was hired on and the training was completed at the facility on . The training was completed five (5) months after staff #A was hired.

The administrator on at 2:15 pm verified the date on the training certificate was five (5) months after staff #A was hired.

Class III

0093 Food Service - Dietary Standards

Based on observation, interview, and record review, the facility failed to note the substitution log before or when the meal was served to document menu substitutions.

Findings included:

A lunch dining and food service review was conducted on . The lunch meal posted in the dining vegetable soup, horsey fish with buttered rice & mixed vegetables, and German chocolate cake. The lunch meal served was consistent with the posted menu.

The food service director was interviewed at 12:36 PM. He stated that today's menu was Cycle 2- Day 6. A review of the lunch meal on the registered dietitian approved menu for Cycle 2-Day 6 showed fish filet, tartar sauce, rissole potatoes, green beans, and pudding tart.

The food service director was interviewed at 12:39 PM on and he stated that he did not note the

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lunch meal substitutions on the log.

Class III

0167 Resident Contracts

Based on record review and interview, the facility failed to provide in its contract, a provision stating that at least 30 days written notice will be given to the resident before any rate increase, for two (resident #12 and resident #13) out of two resident contracts reviewed.

Findings Included:
1)A record review for resident #12 revealed that a provision stating that at least 30 days written notice will be given before any rate increase was absent from the resident contract.
A record review for resident 13 revealed that a provision stating that at least 30 days written notice will be given before any rate increase was absent from the resident contract.
2) During an interview at 2:30 pm with the Administrator, she stated " don ' t see it either, I had my admissions person going through it " .

Class III

E208 ECC - Records

Based on record review and interview, the facility failed to ensure that the nursing assessment was reviewed and signed by a Registered Nurse for one (Resident # 13)out of two resident records reviewed.
Findings Included:
A record review was conducted on Resident #13. The nursing assessment was signed by a Licensed Practical Nurse, not a Registered Nurse.
During an interview with ADON done at 11:45 am, she acknowledged that a Registered Nurse needs to sign assessments, an LPN cannot.
Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Villas At Sunset Bay
7423 Kauai Loop
New Port Richey, FL 34653

Dear Administrator:

This letter reports the findings of a biennial state licensure survey with extended congregate care (ECC) that was conducted on , 2016 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 , 2016.** 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

PRC/clt
Enclosure

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