



RICK SCOTT
GOVERNOR
ELIZABETH DUDEK
SECRETARY

April 1, 2016

Administrator
Somerset
2450 Dora Avenue
Tavares, FL 32778

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on April 1, 2016 by representative(s) 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 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 April 1, 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 this office at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

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**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 04/01/2016
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910627	(X3) DATE SURVEY COMPLETED 03/23/2016
NAME OF PROVIDER OR SUPPLIER SOMERSET	STREET ADDRESS, CITY, STATE, ZIP CODE 2450 DORA AVENUE TAVARES, FL 32778	

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

0000 Initial Comments

On 02-23, 2016 a biennial licensure was conducted at Somerset Assisted Living Facility. Deficient practice was identified. The facility was not in compliance at this time.

0010 Admissions - Continued Residency

Based on observation, interview, and record review, the facility failed to ensure 1 of 11 residents (Resident #11) remained appropriate for the facility.

Findings:

On 03/23/2016 at approximately 10:00 AM, Staff A & E were observed to transfer Resident #11 from his wheelchair to his bed. Staff A and E attempted to get the resident to stand and hold onto his walker 2 times but the resident could not. They then conducted a total lift and transferred Resident #11 to his bed. Resident #11 did not bear wait, his legs remained in a bent position during the transfer. Resident #11 did not assist the staff in any manner during the transfer.

On 03/23/2016 at approximately 10:10 AM, an interview was conducted with the Administrator in reference to Resident #11 being appropriate for the facility. She was asked if Resident #11 was on hospice and she stated no. The Administrator stated she has been thinking about having him evaluated for hospice services, but she was ~~afraid~~ that if the resident is placed on hospice he will think he is dying. She stated he has good days and bad days, some days he assists in transferring and some days he does not.

On 03/23/2016 at approximately 10:34 AM, an interview was conducted with care staff, Staff A, in reference to the transferring of Resident #11. She stated Resident #11 has days he needs total lift for transferring, but not always, it just depends on how he is doing.

On 03/23/2016 a record review was conducted on Resident #11's AHA Form 1823, Resident Health Assessment, dated 1/1/2016. Activities of Daily Living (ADL's) on page 2, states he needs assistance with ambulation and transferring. Comments for transferring states "guidance".

Class III

0081 Training - Staff In-Service

Based on record review and interview, the facility failed to provide the required minimum 1.0-hour

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training for Incident Reporting for 2 out of 4 staff members reviewed (Staff A and Staff C).

Findings:

On , an employee record review was conducted for Staff A and Staff C. There were no certificates of completion for Incident Reporting in the employee records. An interview with the Administrator was conducted on at 11:41 AM regarding missing training certificates for Incident Reporting for Staff A and Staff C. The Administrator looked through employee records herself to confirm missing certificates of completion. She reported that Staff A does not have Incident Reporting Training. The Administrator reported she thinks Staff C has had Incident Reporting Training, but she could not provide documentation of training.

Class III

0162 Records - Resident

Based on record review and interview, the facility failed to ensure the resident record contained a written informed consent for 1 out of 2 residents reviewed (Resident #2).

Findings:

On , a record review was completed for Resident #2 and the resident's record did not contain a written informed consent.

An interview was conducted with the Administrator on at 11:41 AM regarding missing items in Resident #2's record, including the written informed consent. She stated, "He's getting a new contract anyways." The Administrator was unable to provide a copy of the written informed consent for Resident #2.

Class III

0167 Resident Contracts

Based on record review and interview, the facility failed to ensure the contract contained provisions for the daily, weekly, or monthly rate for 1 out of 2 records reviewed (Resident #2).

Findings:

On , a record review was completed for Resident #2 and the contract did not contain the daily, weekly, or monthly rate.

An interview was conducted with the Administrator on at 11:41 AM regarding missing items in Resident #2's contract including the rate. She states, "He's getting a new contract anyways." The Administrator confirmed that Resident #2's contract is missing a whole paragraph, regarding rate.

Class III