RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Broadview Assisted Living
2110 Fleischmann Road
Tallahassee, FL 32308

RE: ECC Monitoring Plus Complaint Numbers 2016000489, 2016001924, 2016003431

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2016 by a representative 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. Should you have any questions please call me at 850-412-4540.

Sincerely,

Donah Helberg
Field Office Manager

DH/dh
Enclosure
XG90

Tallahassee Field Office
2727 Mahan Drive, Mail Stop #46
Tallahassee, FL 32308
Phone:850-412-4540; Fax:(850) 922-9162
AHCA.MyFlorida.com

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965291	04/13/2016
NAME OF PROVIDER OR SUPPLIER **BROADVIEW ASSISTED LIVING**	STREET ADDRESS, CITY, STATE, ZIP CODE **2110 Fleischmann Road** **TALLAHASSEE, FL 32308**	

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

0000 Initial Comments

On , , 2016 through , , 2016 an unannounced ECC monitoring in conjunction with a complaint survey was conducted at Broadview Assisted Living Facility. Deficiencies were identified at the time of the survey

0078 Staffing Standards - Staff

Based on record review and interview the facility failed to provide documentation verifying staff are free from signs and symptoms of communicable ..... for 2 of 3 sampled staffs. (A, C)
The findings:
On / three staff training records were randomly sampled for the purpose of verifying completion of required training and communicable ..... statements. Review of training records for staffs A and C indicated there was no documentation of required communicable statements.
On at approximately 10:20 a.m. and interview was conducted with the Director of nursing (DON) regarding the communicable ..... statements for staff A and staff D. DON reported, "I have not been to locate a communicable statement for staff A or staff C ".

0091 Training - Documentation & Monitoring

Based on record review and interview the facility failed to provide documentation of compliance with staffing trainings for 1 of 3 sampled staffs. (C)
The findings:
On / three staff training records were randomly sampled for the purpose of verifying completion of trainings required within 30 days of hire. Review of training records for staff C indicated there was no documentation of required trainings.
On / at approximately 10: 11 a.m. an interview was conducted with the Administrator regarding required trainings for staff C. Administrator reported, "We do not have any trainings for that staff C. I have looked in our new system and I cannot find any evidence of training. I have put staff C on the list to receive all trainings by the end of this month. We were not aware that staff C had not had any of the required trainings until you brought it to our attention".
On at approximately 10:37 a.m. a follow-up interview was conducted with the Administrator regarding training for staff C. Administrator reported, "staff C will come in this evening (/) and start the required training".

0161 Records - Staff

Based on record review and interview the facility failed to provide documentation verifying staffs are free

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BROADVIEW ASSISTED LIVING	**2110 Fleischmann Road TALLAHASSEE, FL 32308**

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

from signs and symptoms of communicable for 2 of 3 sampled staffs (A, C) and failed to provide documentation of compliance with staffing trainings for 1 of 3 sampled staffs. (C)
The findings:
On / three staff records were randomly sampled for the purpose of verifying completion of required trainings and communicable statements. Review of training records for staff A indicated there was no documentation of required communicable statements. Review of training records for staff C indicated there was no documentation of communication statements and there was no documentation of trainings required in during the first thirty days of employment.
On / at approximately 10: 11 a.m. an interview was conducted with the Administrator regarding required trainings for staff C. Administrator reported, "We do not have any trainings for that staff C. I have looked in our new system and I cannot find any evidence of training. I have put staff C on the list to receive all trainings by the end of this month. We were not aware that staff C had not had any of the required trainings until you brought it to our attention".
On / / at approximately 10:20 a.m. and interview was conducted with the Director of nursing (DON) regarding the communicable statements for staff A and staff D. DON reported, "I have not been to locate and communicable statement for staff A or staff C ."
On / at approximately 10:37 a.m. a follow-up interview was conducted with the Administrator regarding training for staff C. Administrator reported, "staff C will come in this evening ( ) and start the required training".