RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Palms Assisted Living
7364 Lagoon Road
Spring Hill, FL 34606

RE: CCR #2016006426

Dear Administrator:

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

Sincerely,

Charles for

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

XG90

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967766	07/18/2016
NAME OF PROVIDER OR SUPPLIER **PALMS ASSISTED LIVING**	STREET ADDRESS, CITY, STATE, ZIP CODE **7364 LAGOON ROAD** **SPRING HILL, FL 34606**	

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

0000 Initial Comments

On , 2016, a Complaint Survey (CCR #2016006426) was conducted at the Palms Assisted Living Facility, License #11765. Deficient practice was identified during the survey.

0079 Staffing Standards - Levels

Based on observation and interview, the facility failed to ensure staffing standards for personnel with required training certification for 6 of 6 residents.

Findings:

Entrance into the facility was conducted on at 10:00 AM.

During an interview on at 10:07 AM with Staff A (Resident Care Aide), she stated, "I fill in. I'm a resident care aide. The owner just left. I was just filling in. I come here a couple of hours now and then just to fill in." When asked if she was an employee of the facility she stated, "Yes." When asked if she is a paid employee, she stated, "Yes." When asked if she had a completed application she did not answer. When asked if she assisted residents with the self administration of medications, she stated, "No." When asked if she had received training in and First Aide she stated, "No." When asked if she had received training in residents' rights, incident reporting, control, prior to the question being completed, the RCA stated she had not received any training. When asked if she had a background screen she stated, "I think I had one done yesterday."

An observation on at 10:13 AM showed an employee was observed entering the facility from the garage area.

During an interview on at 10:13 AM with Staff B, Medication Technician, the employee who was observed entering the facility, she stated, "I just got here. I am just clocking in. I work the 10:00 AM shift. I was late because of the heavy equipment. Staff A is a caregiver. Far as I know, she is an employee. She hasn't been working here that long."

A request was made to review the personnel record and training for Staff A with the owner.

During an interview on at 10:37 AM with the Owner she stated "Staff A is not an employee of the facility. She is a family member. She was filling in while I went to the store. I had to get food. I don't have a background check for her. We were checking to see if she would be a good fit." The administrator verified Staff A would have access to the residents since she was in the facility alone. She

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is not employed yet; it is a try out to see if she would be a good fit for the facility because she is older. She has not received any of the required training.

Class III

0081 Training - Staff In-Service

Based on observation and interview, the facility failed to ensure that 1 of 3 staff (Staff A), received the required in-service training prior to provided care to 6 of 6 residents in the facility.

Findings:

Entrance into the facility was conducted on at 10:00 AM.

During an interview on at 10:07 AM with Staff A (Resident Care Aide), she stated, "I fill in. I'm a resident care aide. The owner just left. I was just filling in. I come here a couple of hours now and then just to fill in." When asked if she was an employee of the facility she stated, "Yes." When asked if she is a paid employee, she stated, "Yes." When asked if she had a completed application she did not answer. When asked if she assisted residents with the self administration of medications, she stated, "No." When asked if she had received training in and First Aide she stated, "No." When asked if she had received training in residents' rights, incident reporting, control, prior to the question being completed, the RCA stated she had not received any training. When asked if she had a background screen she stated, "I think I had one done yesterday."

An observation on at 10:13 AM showed an employee was observed entering the facility from the garage area.

During an interview on at 10:13 AM with Staff B, Medication Technician, the employee who was observed entering the facility, she stated, "I just got here. I am just clocking in. I work the 10:00 AM shift. I was late because of the heavy equipment. Staff A is a caregiver. Far as I know, she is an employee. She hasn't been working here that long."

A request was made to review the personnel record and training for Staff A with the owner.

During an interview on at 10:37 AM with the Owner she stated "Staff A is not an employee of the facility. She is a family member. She was filling in while I went to the store. I had to get food. I don't have a background check for her. We were checking to see if she would be a good fit." The

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administrator verified Staff A would have access to the residents since she was in the facility alone. She is not employed yet; it is a try out to see if she would be a good fit for the facility because she is older." She has not received any of the required training.

Class III

Z815 Backaround Screenina: Prohibited Offenses

Based on observation and interview the facility failed to ensure a Level II background screen was completed for 1 of 4 personnel reviewed (Staff A).

Findings:

Entrance into the facility was conducted on at 10:00 AM. Introductions were made to Staff A, RCA (Resident Care Aide) and the nature of the visit was given.

During an interview on at 10:07 AM with Staff A she stated, "I fill in. I'm a resident care aide. The owner just left. I was just filling in. I come here a couple of hours now and then just to fill in. When asked if she was an employee of the facility she stated, "Yes." When asked if she is a paid employee, she stated, "Yes." When asked if she had a background screen she stated, "I think I had one done yesterday."

An observation on at 10:13 AM showed an employee was observed entering the facility from the garage area.

During an interview on at 10:13 AM with Staff B, Medication Technician, the employee who was observed entering the facility, she stated, "I just got here. I am just clocking in. I work the 10:00 AM shift. I was late because of the heavy equipment. Staff A is a caregiver. Far as I know she is an employee. She hasn't been working here that long."

A request was made to review the Level II background screen for Staff A with the owner.

During an interview on at 10:37 AM with the Owner, she stated, "Staff A is not an employee of the facility. She is a family member. She was filling in while I went to the store. I had to get food. I don't have a background check for her. We were checking to see if she would be a good fit." The administrator verified Staff A would have access to the residents since she was in the facility alone. She is not employed yet; it is a try out to see if she would be a good fit for the facility because she is older.

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Unclassified