AGENCY FOR HEALTH CARE ADMINISTRATION

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968388	10/12/2016
NAME OF PROVIDER OR SUPPLIER **ANGELS SENIOR AT CONNERTON COURT LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **21021 BETEL PALM LN** **LAND O LAKES, FL 34638**	

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

0000 Initial Comments

Assisted Living Facility

On , 2016, a biennial re-licensure survey with limited nursing services (LNS) in conjunction with a complaint survey, (CCR# 2016008876), was conducted at Angels Senior Living at Connerton Court, Assisted Living Facility. Deficient practice was identified during the surveys.

(License number # 12268)

0055 Medication - Storage and Disposal

Based on observation, interview, and record review, the facility failed to store a medication device in a secure place that was out of sight of other residents.

Findings included:

A tour of the facility began at 9:33 AM on / / . The open medication observed on the 1st floor and it showed a small portable tank and a larger tank sitting on the floor. The larger unit had the tubing attached to the tank with the cannula wedged underneath the wheel of the unit. There was also a against both tanks.

The d of nursing was interviewed at 10:04 AM on / and asked to observe the location of the 2 tanks. The director of nursing observed the tanks and stated that they did not know who it belonged to and that they should be stored in a container, not sitting on the floor. It was also acknowledged that the tanks were easily accessible to other residents in that location.

The administrator was asked for a copy of the facility ' s policies and procedures on storage of tanks. At 11:38 AM on / , the administrator stated that there was no written policy and procedure concerning the handling and storage of tanks.

Class III

0078 Staffing Standards - Staff

Based on record review and interview, the facility failed to have a personnel file which contained an annual examination and a written statement from a health care provider documenting that the direct care staff does not have any signs or symptoms of communicable for one (#A) of

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three direct care staff and the administrator who were sampled for annual examination and a communicable statement.

Findings included:

Record review of staff #A's personnel file on revealed she was hired on there was no documentation which stated she had completed a examination annually and there was no statement from a health care provider which stated she was free of any signs or symptoms of communicable .

When interviewed on / / at 12:10 pm., the administrator verified the required documentation for the annual examination and the communicable statement for staff #A was not in her personnel file.

Class III

0167 Resident Contracts

Based on record review and interview, the facility failed to ensure that the resident contract contained the daily, weekly, or monthly rate as required for one (Resident #6) of two resident contracts reviewed.

Findings included:

A review of Resident #6's contract was conducted on / / and revealed that there was no daily, weekly, or monthly rate specified in the contract. A review of Resident #6 ' s contract revealed that the section labeled, "Pricing," had been left blank. There was nothing written in specifying what the basic rate was, there was nothing written in specifying what the additional services rate was, and there was nothing written in specifying what the total price for accommodations and all services was. There was no other section of the resident's contract that contained a daily, weekly, or monthly rate.
In an interview at 3:00 PM on , the Administrator confirmed that a daily, weekly, or monthly rate was not included in Resident #6's contract. The Administrator stated that this rate was supposed to be included in the resident contract and that the omission of the rate in Resident #6's contract was an oversight.

Class III

RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

, 2016

Administrator
Angels Senior at Connerton Court LLC
21021 Betel Palm Ln
Land O Lakes, FL 34638

RE: Biennial with LNS & **CCR# 2016008876**

Dear Administrator:

This letter reports the findings of a biennial state licensure survey with limited nursing services (LNS) and a complaint survey that were conducted on , 2016, by representative(s) of this office.

Attached are the provider's copies of the State (5000-3547) Forms, which indicate 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 surveys, which may include desk reviews or onsite revisits.

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.

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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,

Patricia Reid Caufman
Field Office Manager

PRC/kpr

Enclosures: State Forms 5000-3547

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