STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911318	**12/06/2016**
NAME OF PROVIDER OR SUPPLIER **ISLANDS ALF (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **901 NORTH HIAWASSEE ROAD ORLANDO, FL 32818**	

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

0000 - Initial Comments

On 6, 2016 an abbreviated biennial re-licensure survey in conjunction with Limited Mental Health and Limited Nursing Service surveys was conducted at The Islands ALF, license #4690. Deficiencies were found at the time of the visit.

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on personnel record reviews and interview the facility failed to ensure that 3 of 4 personnel records (A, B, C) contained documented evidence of a negative ( ) examination on an annual basis.

Findings:

1. Personnel record review for staff A revealed a negative examination dated . There was no documented evidence of a negative examination for 2016.

2. Personnel record review for staff B revealed a negative examination dated / . There was no documented evidence of a negative examination for 2016

3. Personnel record review for staff C, the administrator, revealed a negative examination dated / . There was no documented evidence of a negative examination for 2016.

On at 1:55 PM, the administrator confirmed the findings and said "I told them to make an appointment with their doctor." She said "I have an appointment for myself next week."

Class III

0083 - Training - First Aid and - 58A-5.0191(4) FAC

Based on record reviews and interview, the facility failed to ensure a staff member who held a current valid ( ) card was in the facility at all times.

Findings:

Personnel record review for staff A, a caregiver, revealed a card that expired on . Review of the facility staffing schedule revealed staff A was scheduled to work alone on from 7pm-7am.

Personnel record reviews for staff B and staff D, both caregivers, revealed cards that expired on

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SUMMARY STATEMENT OF DEFICIENCIES
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Review of the facility staffing schedule revealed staff B and staff D, neither of whom had a valid card, were scheduled to work on from 7am-7pm.

On at 1:55 PM, the administrator said "I have a class scheduled for them next week."

Class III

L243 - LMH - Training - 429.075(1) FS; 58A-5.0191(8) FAC

Based on personnel record reviews and interview, the facility failed to ensure staff who had direct contact with mental health residents in a licensed limited mental health facility, received the required minimum 3 hours of continuing education biennially for 2 of 4 staff (A & B).

Findings:

Personnel record review for staff A and staff B revealed a certificate of training in the topics of limited mental health, dated .

There was no documented evidence staff A and staff B received the required minimum of 3 hours of continuing education after .

On at 1:55 PM, the administrator confirmed the findings.

Class III

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on personnel record review, review of the Agency's background screening clearing house, and interview, the facility did not maintain the employment status of 1 of 4 facility employees (B) subject to a background screening.

Findings:

Personnel record review for staff B revealed she was hired in the capacity of a caregiver on /13.

Review of the Agency's background screening clearing house revealed the employment status of staff B was not listed on the facility roster.

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SUMMARY STATEMENT OF DEFICIENCIES
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On 12/06/16 at 1:55 PM, the administrator confirmed the finding.

Unclassified

Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on record review and interview, the facility failed to ensure 1 of 4 staff (A) who required a background screening, did not have any disqualifying offenses and allowed staff (A) to work without an eligible background screening.
Findings:
Review of the facility staffing schedule revealed staff A was scheduled to work on from 7pm-7am.
Personnel record review for staff A revealed she was hired in the capacity of a caregiver on / . A background screening dated / read 'pending' results.
On at 1:55 PM, the administrator confirmed the background screening result for staff A was pending and said "the screening was done last week."
Unclassified

RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

, 2016

Administrator
Islands Alf (the)
901 North Hiawassee Road
Orlando, FL 32818

RE: Re-licensure w/LNS & LMH

Dear Administrator:

This letter reports the findings of a state licensure survey 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 11, 2017.** 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 Lorraine Henry at -2502.

Sincerely,

Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure
XG90

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