RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

, 2016

Administrator
Tangerine Cove Of Brooksville
307 Howell Avenue
Brooksville, FL 34601

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on 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 , 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 Chuck Bory at 386-462-6201.

Sincerely,

Charles Bory for

Kriste J. Mennella
Field Office Manager

KJM/CB
Enclosure

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910431	12/12/2016
NAME OF PROVIDER OR SUPPLIER **TANGERINE COVE OF BROOKSVILLE**	STREET ADDRESS, CITY, STATE, ZIP CODE **307 HOWELL AVENUE** **BROOKSVILLE, FL 34601**	

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

0000 - Initial Comments

On 12/12/2016 an unannounced Extended Congregate Care (ECC) Monitoring Survey was conducted at Tangerine Cove of Brooksville (facility license number 7622). Deficiencies were identified as a result of this survey. The facility is not in compliance at this time.

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on record review and interview, the facility failed to ensure that the Resident Health Assessment (AHCA Form 1823) was updated after a significant change for 1 of 3 residents (Resident #1).

Findings:

On / , a record review was conducted for Resident #1. It showed that the resident's Resident Health Assessment (AHCA Form 1823), dated , documented that the resident was receiving hospice services and at 4 liters per nasal cannula.

During an interview on / at 12:00 PM with the Administrator, she stated, reviewed and confirmed, that Resident #1's Resident Health Assessment (AHCA Form 1823) was not updated to reflect that the resident was no longer receiving hospice care or therapies. The Administrator stated the resident no longer receives or hospice care.

Class III

E210 - ECC - Training - 58A-5.0191(7) FAC

Based on record review and interview, the facility failed to ensure that 1 of 4 staff (Staff B) received the required 2 hours of Extended Congregate Care (ECC) in-service training.

Findings:

On , a record review of Staff B's personnel record showed a hire date of / . There was documentation in the personnel record that Staff B received the required 2 hours of ECC training since her date of hire.

During an interview on at 12:00 PM with the Administrator, she confirmed that there is no documentation in Staff B's personnel record show that Staff B received the required 2 hours of ECC

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training. The Administrator stated she could not believe that the employee had never had ECC training because she has been a long time employee.

Class III