STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911310	R 02/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PINE ACRES GOLDEN AGE CENTRE	**5030 CUB LAKE DRIVE APOPKA, FL 32703**

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

0000 - Initial Comments

A follow-up visit to a biennial survey in conjunction with Extended Congregate Care (ECC) was conducted on , , 2017. Pine Acres Golden Age Centre, license #6106, had deficiencies at the time of the visit.

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

Based on record review and interview the facility failed to ensure staff were qualified to perform their assigned duties consistent with their level of education, training, preparation, and experience and allowed unlicensed staff to administer medications to 1 of 1 sampled residents (2.)

Findings:

Record review for resident #2 revealed a health assessment form 1823 dated that read she required medication administration.

During an interview with the unlicensed staff member on at 2:50 PM, she said she assisted resident #2 with her medications.

During an interview with the administrator on at 3:45 PM, he said the unlicensed staff assisted resident #2 with her medications and he confirmed the 1823 form read she required medication administration.

Class III

E204 - ECC - Admissions & Continued Residency - 429.26(10); 429.07(3)b ; 58A-5.030(5)

Based on record review and interview, the facility retained a resident who no longer met the continued residency requirements in a facility that held an Extended Congregate Care (ECC) license for 1 of 1 sampled residents (2.)

Findings:

Resident #2 was identified by the administrator as a resident who received ECC services for her Activities of Daily Living (ADLs.)

Review of a health assessment form 1823 dated revealed she required 24 hour nursing supervision, which made her inappropriate for continued residency.

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	AL11911310	R **02/09/2017**
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SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

During an interview with the administrator on [redacted] at 3:45 PM, he confirmed the finding on the health assessment form and said resident #2 did not require 24 hour nursing supervision.

Class III