

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/10/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965370	(X3) DATE SURVEY COMPLETED 03/28/2017
NAME OF PROVIDER OR SUPPLIER BROOKDALE ALTAMONTE SPRINGS	STREET ADDRESS, CITY, STATE, ZIP CODE 360 MONTGOMERY ROAD ALTAMONTE SPRINGS, FL 32714	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments The re-licensure survey was conducted on _____, Brookdale Altamonte Springs (license #9786) had deficiencies at the time of the visit. 0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC Based on observation, record review and interview, the facility failed to store medications in a locked cabinet, locked cart, or other locked storage receptacle, _____, or area at all time for 1 of 2 sampled residents (#5) that requires assistance with medications. Findings: On _____ at 11:10 AM, an observation in the _____ resident #5 found an over-the-counter bottle of _____ sleep aid on the kitchen table and over-the-counter Naphcon A eye _____ eye drops, a tube of triple _____ ointment, and a tube of prescription Urea 20% cream on the nightstand table near the recliner in #5's _____. An interview on _____ at 11:10 AM with resident #5 about the medications found and she answered, "Oh that is for my dry skin". Resident #5's record review revealed an AHCA 1823 Health Assessment form dated _____ requiring needing medication administration; furthermore, a clarification order dated _____ stating, "may take meds with assist". An interview on _____ at 3:30 PM with Health and Wellness Director whom confirmed the finding. Class III 0078 - Staffing Standards - Staff - 58A-5.019(2) FAC Based on personnel record review and interview, the facility failed to obtain a statement from the health care provider for 3 of 5 sampled Staff (B, C & D) documenting freedom from communicable _____. Findings: 1. Personnel Record review for Staff B (caregiver, hired _____), revealed no documentation to confirm she was free from communicable _____.		

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2. Personnel Record review for Staff C (caregiver, hired), revealed no documentation to confirm she was free from communicable 3. Personnel record review for Staff D (administrator, hired), revealed no documentation to confirm he was free from communicable On //17 at 1:00 PM, the administrator and the business manager confirmed that the documentation for Staff B, C and D was not in the records. Class III 0091 - Training - Documentation & Monitoring - 58A-5.0191(12) FAC Based on personnel record review and interview the facility failed to ensure that 3 of 5 sampled staff had certificates, which included the number of hours in the program for the one-time training in (/). (A, B & C) Findings: Review of the personnel records for Staff A (hired), B (hired) and C (hired) revealed certificates for training in / that did not include the number of hours for the program. The hours were listed as "0" (zero). In an interview with the business manager on at 4:00PM, she stated the certificates printed this way. She stated she would look into correcting it. Class		