STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967538	04/19/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUMMERHAVEN ASSISTED LIVING, LLC	**520 LANYARD LANE DE BARY, FL 32713**

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

0000 Initial Comments

An abbreviated assisted living facility survey was conducted on .

The facility had licensure deficiencies at the time of the visit.

0007 Admissions - Criteria

Based on record review and family and staff interview, the facility failed to have a resident meet admission criteria for 1 of 6 sampled residents, Resident # 6.

The findings include:

An interview with the family member for Resident #6 was conducted on at 11:04 a.m. She stated that Resident #6 had a and was receiving home health services.

Review of the clinical record for Resident #6 revealed a Health Assessment (1823) dated . It revealed the resident had a to the .

The Residents's Home Health Plan of Care (dated -) revealed she was receiving skilled nursing services for care to the right .

On at 11:40 a.m., the Resident's Home Health Nurse stated she just completed the treatment for Resident #6's for the day. She stated the resident had the for a long time, and confirmed it had been as high as a .

The Administrator on at 11:52 a.m. confirmed the Resident was admitted with a and he probably shouldn't have admitted her.

Class III

0052 Medication - Assistance with Self-Admin

Based on observation and staff interview, the facility failed to assist with medication administration appropriately for 1 of 3 sampled residents, Resident # 1.

The findings include:

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On at 8:45 a.m. Resident #1 was observed sleeping in his bed. On the computer desk in his a medication cup with 7 pills in it and 1 gummy . The Administrator on at 845 a.m. stated that he was getting ready to get the resident up and give him his medication when the front door bell rang and he went to answer it.

On at 8:47 a.m., the Administrator escorted the resident into the sat him down on a chair. He gave him the chewable gummy and told him to chew it. Then the Administrator gave him the rest of the 7 pills and gave him some water to drink with it. He did not tell the resident what medications he was assisting him with. The resident was helped up to his walker and he was directed to walk to the kitchen. The Administrator left the . Resident #1 walked through the his . He was observed to still be chewing. He was chewing the 7 other pills in his mouth. Pill remnants and white residue seen in his mouth.

Review of the resident Health Assessment revealed he needed assistance with medication administration. The Administrator left the medications unsecured in the , did not tell him what he was giving him and did not watch him swallow the medications.

The Administrator was asking in a follow up interview at 8:55 AM on about the medication pass and he confirmed he did not monitor the Resident's medication usage to completion.

Class III

0056 Medication - Labeling and Orders

Based on record review and staff interview, the facility failed to obtain a new physician order for a medication for 1 of 4 sampled residents, Resident #6.

The findings include:

Review of the medications on hand for Resident #6 revealed a bottle of , 81 mg. Review of the resident's 1823 Health Assessment , the , physician order was for 325 mg daily with an evening a meal.

The Administrator on at 905 a.m. reviewed the clinical record and stated he did not have the new physician order for , 81 mg. The daughter wanted the Baby , and brought it in.

Class III

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0057 Medication - Over The Counter (OTC) Products

Based on observation and staff interview, the facility failed to label over the counter medications appropriately for 1 of 4 sampled residents, Resident #6.

The findings include:

Review of the centrally stored medications for Resident #6 on at 8:51 a.m. revealed a bottle of C, bottle of , 81 mg , and a box of Align Probiotic. None of these over- the- counter medications had the resident's name on it. The Administrator was present and confirmed this. He stated that these over the counter medications probably were given to an employee who did not label them and just placed them in her medication bin.

Class III

0080 Training - Core & Competency Test

Based on record review and staff interview, the Facility failed to ensure that the Administrator obtain 12 units of continuing education credits(CEUS) every 2 years.

The findings include:

Review of the Administrator's training file revealed he had only 4 CEUs in 2015 and none thereafter. The Administrator on at 8:13 a.m. confirmed he did not have 12 CEUS.

Class III

0085 Training - Nutrition & Food Service

Based on employee record review and staff interview, the Facility failed to have the Food Service Designee have the 2 hours continuing education units (CEUS) annually in topics pertaining to nutrition and food service.

The findings include:

The Administrator stated on at 1128 a.m. that he was the Food Service Designee. He was asked for his 2 hours of CEUs in nutrition and food service. He stated he did not have the 2 hours of

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CEUS.

Class III

0090 Training -

Based on employee record review and staff interview, the facility failed to training in ( ) for 1 of 2 sampled employees, Employee A.

The findings include:

Review of employee record for Employee A revealed she was hired as a caregiver on . She did not have evidence of 1 hour training within 30 days of employment.

The Administrator on at 10:30 a.m. confirmed he did not do training for his employees.

Class III

0093 Food Service - Dietary Standards

Based on observation and staff interview, the Facility failed to provide a substantial snack and failed to have an 3-day emergency food and water supply affecting 6 residents in the facility (Residents #1-#6).

The findings include:

The current census of the facility is 6 residents. The Administrator on at 9:59 a.m. stated that meal times are 9 am, 1 pm and 5 p.m. There is more than 14 hours between dinner and breakfast. The Administrator on at 9:59 a.m. stated he does not offer a snack to the residents but if they ask he would give it to them.

Observation of the emergency water supply revealed 6 gallons of water . There was another 5 gallons of water in the patio area but it was leaking and not full. Review of the non perishable food supply in the pantry revealed 3 cans of 9 ounce tuna , and 3 cans of 9 ounce chicken. There were several cans of vegetables and fruit but there was not evidence he had enough food on hand to feed the residents 3 meals a day for 3 days (54 meals total).

The Administrator on at 9:59 a.m. stated he probably did not have enough non perishable

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food supply and water supply for his 6 residents.

Class III

Z814 Backaround Screenina Clearinahouse

Based on employee record review , review of the Agency's Healthcare Background Screening Unit website, and staff interview, the facility failed to update the employee roster for 2 of 3 sampled employees, Employees B & C.

The findings include:

Employee B was hired as a caregiver on . Employee C was hired on 3// and terminated employment with the facility on , 2017.

The Agency for Health Care Administration's background screening unit was accessed on at 12:36 p.m. Employee B was not added to the employee roster within 10 days of hire. Employee C was not removed from the employee roster within 10 days of termination of employment.

The Administrator on at 12:37 p.m. confirmed he did not update these two employees on the employee roster through the Agency's background screening unit.

Unclassified