STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968211	**05/15/2017**
NAME OF PROVIDER OR SUPPLIER **ROSIE'S MANOR ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **1910 SE RAINIER ROAD** **PORT SAINT LUCIE, FL 34952**	

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

0000 - Initial Comments

On , an Extended Congregate Care monitoring survey was conducted at Rosie's Manor LLC, license number 12131. The facility had deficiencies identified during the survey.

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

Based on observations and interviews, the facility failed to ensure staff who provide direct care to residents maintained active certifications in First Aid and , , ( ) as required, for 1 of 1 sampled Staff (A).

The findings included:

On at 2:45 PM, this writer arrived at the facility; only one staff member, Staff A, was present. At that time, Staff A contacted the facility's Manager by telephone and advised the Manager would arrive shortly; she arrived at 3:15 PM. During that time, Staff A was observed interacting with multiple residents.

During an interview conducted with Staff A on at 3:03 PM, she was asked and provided the following information. She estimated she has worked at this facility a few weeks. She described how she handles giving snacks to residents and the types of snacks given. She stated as it relates to leisure activities, she provides activities the residents prefer, she also takes them for walks outdoors. There is sufficient staffing at the facility to take care of resident needs.

On at 3:17 PM, Staff A's personnel file was requested for review. The Manager stated Staff A came from a sister facility to work as a housekeeper only, and did not have a personnel file on site for review. She stated Staff A worked at the facility for about one week. At 3:20 PM, Resident #3, stated Staff A cooks the meals and assists her with showers. At 3:23 PM, the Manager stated Staff A started working at the facility the day before, . At about 4:10 PM, Staff A was interviewed by telephone and stated she has current certifications for First Aid and but had not yet given copies to the facility. At 4:15 PM, the Manager was asked to provide Staff A's current certifications in First Aid and by at 10:00 AM. Nothing was received from the facility.

Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on observations and interviews, the facility failed to maintain required staff records for 1 of 1 sampled Staff (A).

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

The findings included:

On . . . . . at 2:45 PM, this writer arrived at the facility; only one staff member, Staff A, was present. At that time, Staff A contacted the facility's Manager by telephone and advised the Manager would arrive shortly; she arrived at 3:15 PM. During that time, Staff A was observed interacting with multiple residents.

On at 3:23 PM, Staff A's personnel file was requested for review. The Manager stated Staff A came from a sister facility to work as a housekeeper only, and did not have a personnel file on site for review. She stated Staff A worked at the facility for about one week. At 3:20 PM, Resident #3, stated Staff A cooks the meals and assists her with showers. At 3:23 PM, the Manager stated Staff A started working at the facility the day before, .

On at 4:15 PM, the Manager confirmed the following documents were not available for review:

1. Copy of employment application with reference

2. Training certficates

3. Documentation of compliance with Level 2 background screening

Class III

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

Based on record review and interviews, the facility failed to maintain employment status records within the Care Provider Background Screening Clearinghouse as required, for 1 of 2 sampled Staff (B).

The findings included:

In an interview conducted at 3:40 PM, Staff B, a Caregiver and Medication Technician, stated she has worked for the facility for about 2.5 years. Review of the facility's Background Screening Clearinghouse record revealed she was not listed on the facility's Employee Roster.

This concern was discussed with the Manager on . . . . . at 4:15 PM. She confirmed Staff B

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

provides direct care to the facility's residents.

Unclassified

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

Based on observations, interviews and record review, the facility failed to ensure staff who provide direct care to residents obtained the required Level II background screenm, for 1 of 2 sampled Staff (A).

The findings included:

On at 2:45 PM, this writer arrived at the facility; only one staff member, Staff A, was present. At that time, Staff A contacted the facility's Manager by telephone and advised the Manager would arrive shortly; she arrived at 3:15 PM. During that time, Staff A was observed interacting with multiple residents.

In interview conducted with Staff A on at 3:03 PM, she was asked and provided the following information. She estimated she has worked at this facility a few weeks. She described how she handles giving snacks to residents and the types of snacks given. She stated as it relates to leisure activities, she provides activities the residents prefer, she also takes them for walks outdoors. There is sufficient staffing at the facility to take care of resident needs.

On at 3:17 PM, Staff A's personnel file was requested for review. The Manager stated Staff A came from a sister facility to work as a housekeeper only, and did not have a personnel file on site for review. She stated Staff A worked at the facility for about one week. At 3:20 PM, Resident #3, stated Staff A cooks the meals and assists her with showers. At 3:23 PM, the Manager stated Staff A started working at the facility the day before, .

Review of the Agency Background Clearinghouse revealed Staff A did not have any records of screening or screening requests related to Level 2 background screening.

Unclassified

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

0000 - Initial Comments

On , an Extended Congregate Care monitoring survey was conducted at Rosie's Manor LLC, license number 12131. The facility had deficiencies identified during the survey.

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

Based on observations and interviews, the facility failed to ensure staff who provide direct care to residents maintained active certifications in First Aid and , , ( ) as required, for 1 of 1 sampled Staff (A).

The findings included:

On at 2:45 PM, this writer arrived at the facility; only one staff member, Staff A, was present. At that time, Staff A contacted the facility's Manager by telephone and advised the Manager would arrive shortly; she arrived at 3:15 PM. During that time, Staff A was observed interacting with multiple residents.

During an interview conducted with Staff A on at 3:03 PM, she was asked and provided the following information. She estimated she has worked at this facility a few weeks. She described how she handles giving snacks to residents and the types of snacks given. She stated as it relates to leisure activities, she provides activities the residents prefer, she also takes them for walks outdoors. There is sufficient staffing at the facility to take care of resident needs.

On at 3:17 PM, Staff A's personnel file was requested for review. The Manager stated Staff A came from a sister facility to work as a housekeeper only, and did not have a personnel file on site for review. She stated Staff A worked at the facility for about one week. At 3:20 PM, Resident #3, stated Staff A cooks the meals and assists her with showers. At 3:23 PM, the Manager stated Staff A started working at the facility the day before, . At about 4:10 PM, Staff A was interviewed by telephone and stated she has current certifications for First Aid and but had not yet given copies to the facility. At 4:15 PM, the Manager was asked to provide Staff A's current certifications in First Aid and by at 10:00 AM. Nothing was received from the facility.

Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on observations and interviews, the facility failed to maintain required staff records for 1 of 1 sampled Staff (A).

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SUMMARY STATEMENT OF DEFICIENCIES
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The findings included:

On . . . . . at 2:45 PM, this writer arrived at the facility; only one staff member, Staff A, was present. At that time, Staff A contacted the facility's Manager by telephone and advised the Manager would arrive shortly; she arrived at 3:15 PM. During that time, Staff A was observed interacting with multiple residents.

On at 3:23 PM, Staff A's personnel file was requested for review. The Manager stated Staff A came from a sister facility to work as a housekeeper only, and did not have a personnel file on site for review. She stated Staff A worked at the facility for about one week. At 3:20 PM, Resident #3, stated Staff A cooks the meals and assists her with showers. At 3:23 PM, the Manager stated Staff A started working at the facility the day before, .

On at 4:15 PM, the Manager confirmed the following documents were not available for review:

1. Copy of employment application with reference

2. Training certficates

3. Documentation of compliance with Level 2 background screening

Class III

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

Based on record review and interviews, the facility failed to maintain employment status records within the Care Provider Background Screening Clearinghouse as required, for 1 of 2 sampled Staff (B).

The findings included:

In an interview conducted at 3:40 PM, Staff B, a Caregiver and Medication Technician, stated she has worked for the facility for about 2.5 years. Review of the facility's Background Screening Clearinghouse record revealed she was not listed on the facility's Employee Roster.

This concern was discussed with the Manager on . . . . . at 4:15 PM. She confirmed Staff B

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

provides direct care to the facility's residents.

Unclassified

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

Based on observations, interviews and record review, the facility failed to ensure staff who provide direct care to residents obtained the required Level II background screenm, for 1 of 2 sampled Staff (A).

The findings included:

On at 2:45 PM, this writer arrived at the facility; only one staff member, Staff A, was present. At that time, Staff A contacted the facility's Manager by telephone and advised the Manager would arrive shortly; she arrived at 3:15 PM. During that time, Staff A was observed interacting with multiple residents.

In interview conducted with Staff A on at 3:03 PM, she was asked and provided the following information. She estimated she has worked at this facility a few weeks. She described how she handles giving snacks to residents and the types of snacks given. She stated as it relates to leisure activities, she provides activities the residents prefer, she also takes them for walks outdoors. There is sufficient staffing at the facility to take care of resident needs.

On at 3:17 PM, Staff A's personnel file was requested for review. The Manager stated Staff A came from a sister facility to work as a housekeeper only, and did not have a personnel file on site for review. She stated Staff A worked at the facility for about one week. At 3:20 PM, Resident #3, stated Staff A cooks the meals and assists her with showers. At 3:23 PM, the Manager stated Staff A started working at the facility the day before, .

Review of the Agency Background Clearinghouse revealed Staff A did not have any records of screening or screening requests related to Level 2 background screening.

Unclassified