

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/09/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910117	(X3) DATE SURVEY COMPLETED 05/16/2017
NAME OF PROVIDER OR SUPPLIER HARMONY RETIREMENT LIVING, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1411 EL PASO AVENUE ORLANDO, FL 32806	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A monitoring visit for Extended Congregate Care (ECC) was conducted on _____, Harmony Retirement license #736 had deficiencies found 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 the freedom from communicable healthcare provider statement was based on an examination no more than 6 months from the date of hire for, 2 of 3 sampled staff (B and C). Findings: Staff B was hired _____ and was a caregiver. The review revealed a healthcare provider statement that indicated freedom from communicable _____ dated _____ more than 6 months from the date of hire. Staff C was hired _____ 2017 and was a caregiver. The review revealed a healthcare provider statement that indicated freedom from communicable _____ dated _____, more than 6 months from the date of hire. In a telephone interview with the administrator on _____ at 11:30 AM who said, she did not know the healthcare provider statement needed to be within 6 months of hire. Class III 0081 - Training - Staff In-Service - 58A-5.0191(2) FAC Based on observations and interviews the facility did not provide or arrange for 2 of 3 sampled staff (B and C) to receive the mandated in-services training. Findings: Personnel record review revealed the following: 1. Staff B was hired _____ and was a caregiver. There was no evidence she attended: A 1-hour in-service training regarding reporting major incidents and adverse incidents. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation.		

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The facility's resident elopement response policies and procedures A 1- hour in-service training regarding resident rights in an assisted living facility. Recognizing and reporting resident, neglect, and A 1- hour in-service training safe food handling practices. There was no evidence she attended ALF Core training and was exempt from these 2 in-service trainings A 3- hour in-service training regarding resident behavior and needs. Providing assistance with the activities of daily living. 1 hour in-service training in control, including universal precautions, and facility sanitation procedures before providing personal care to residents. There was no evidence she was a Home Health Aide (HHA) , Certified Nursing Assistant (CNA) or a nurse, therefore exempt from these 2 in-service training. 2. Staff C was hired 2017 and was a caregiver. A certificate dated indicated a 4- hour in-service training that included control, / , resident's rights, medication errors and medication management. The certificate did not indicate the duration of each in-service training. Therefore unable to ascertain if the staff received the required hours of each in-service training. A certificate dated indicated a 4- hour in-service training in Extended Congregate Care and Limited Mental Health (ECC/LMH), recognizing neglect, , and elopement. The certificate did not indicate the duration of each in-service training. Therefore unable to ascertain if the staff received the required hours of each in-service training. A certificate dated indicated in-service training related to elopement from another facility, located in another county. There was no evidence to confirm she attended an in-service training regarding the facility's elopement response policies and procedures. A certificate dated indicated she received an in-service training regarding emergency procedures & evacuation including chain of command from another facility, located in another county. There was no evidence to confirm she attended an in-service training regarding the facility's emergency procedures & evacuation including chain of command. In a telephone interview with the administrator on at 11:30 AM who said the staff were trained,		

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she just did not have the correct certificates. Class III 0082 - Training - / - 58A-5.0191(3) FAC Based on observation and interview the facility did not provide or arrange for 1 of 3 sampled staff (B) to attend /received one-time education course on and . Findings: Personnel record review for staff B hired revealed no evidence to confirm she attended/received one-time education course on and . In a telephone interview with the administrator on at 11:30 AM who said the staff had the training but did not bring a copy of her certificate for the facility file. Class III 0083 - Training - First Aid and - 58A-5.0191(4) FAC Based on personnel record review and interview, the facility failed to have one staff member who held a current and valid card that documented the completion of courses in () and First Aid were in the facility at all times when residents were present and failed to ensure that and First Aid training were from a course offered by an accredited college, university or vocational school; a licensed hospital; the American Red Cross, American Association, or National Safety Council; or a provider approved by the Department of Health for 1 of 3 sampled staff (C). Findings: During the facility, entrance on at 9 AM staff a stated the census was 12. There were two staff present in the facility; the administrator was out, but available by phone. Review of the facility staff schedule for , 2017, which was a calendar on a desk by the medication closet, revealed that the staffing pattern consisted of staff A, B, C, and D, alternating shifts. Staff C worked alone on 5/3, 5/4, 5/5, and . Staff A worked alone 5/6, 5/7, and .		

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Staff A had First Aid/ . . . that expired Staff D had First Aid / . . . that expired on Staff C had a card dated that indicated /First aid from an internet (on-line) provider and indicated it was valid for 2 years. In a telephone interview with the administrator on at 11:45 PM stated, she had not realized the First Aid and for staff A, C and D had expired. Class III 0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(5) FAC Based on interview and observation the facility failed to ensure 1 of 3 unlicensed staff (B) who provided assistance with self-administered medications completed a 4 hour class in providing assistance with self-administration of medication before assuming the responsibility. Findings: Personnel record review for staff B revealed she was hired A certificate dated that indicated she attended a 2- hour medication update class. The review revealed no evidence to confirm she attended a 4-hour class before she provided assistance with self-administration of medications to the facility residents. In a telephone interview with the administrator on at 11:30 AM who said the staff had the training but did not bring a copy of her certificate for the facility file. Class III 0090 - Training - - 58A-5.0191(11) FAC Based on record review and interview the facility failed to ensure 2 of 3 sampled staff (B & C) who provided care to residents, received at least one hour of training in the facility's policies' and procedures regarding (.). Findings: Personnel record review revealed the following:		

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Staff B was hired and was a caregiver. There was no evidence she attended an in-service training regarding the facility's policies and procedures. Staff C was hired 2017 and was a caregiver. There was no evidence she attended a training regarding the facility's policies and procedures. In a telephone interview with the administrator on at 11:30 AM who said the staff had the training but the certificates were not available. Class III 0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC Based on personnel record review and interview the facility failed to ensure the personnel record for 1 of 4 sampled staff (B) contained the required documentation. Findings: Personnel record review for staff B, hired revealed a job application that was blank. In a telephone interview with the administrator on at 11 AM who said the application was overlooked. Class III Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS Based on record reviews and interview the facility did not maintain an employee roster on the Agency's Background Screening (BGS) Clearing House that listed all the facility employees subject to a background screening for 4 of 4 employees (A, B, C and D). Findings: Review of the facility's Background Screening Clearing House roster on at 1:30 PM AM revealed the facility employee roster did not list any employees (A, B, C, and D) assigned to work on the 2017 schedule. In an interview with the administrator on at 2 PM who said, she did not know about the		

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employee roster. Unclassified		