STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932380	**06/12/2017**
NAME OF PROVIDER OR SUPPLIER **BAY PINES MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **10591 BAY PINES BLVD.** **SAINT PETERSBURG, FL 33708**	

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

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

Based on record review, observation and interview, the facility failed to maintain the employment status of all employees on its roster within the AHCA Background Screening Clearninghouse for 1 of 4 staff sampled (Administrator) and 1 former staff.

Findings included:

A review of the Background screening website on no current staff at the facility.
In an observation on at the facility, the surveyor noted one staff was present at work per the schedule covering for the absent staff.

A review of the background screening website on at 4:00 pm showed that the facility's employee roster was not accurately updated to reflect the end dates of employment for former staff D and current administrator, as reflected in the current staffing schedule.

In an interview with the administrator on at 12:26 pm confirmed that the roster had not been done and that the former staff had not worked at the facility for three weeks.

Unclassified

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIER **BAY PINES MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **10591 BAY PINES BLVD.** **SAINT PETERSBURG, FL 33708**	

SUMMARY STATEMENT OF DEFICIENCIES
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0000 - Initial Comments

Assisted Living Facility

A complaint investigation, (CCR# 2017002985), was conducted at By Pines Manor on with deficiencies identified at the time of the visit.

(License # 7797)

0081 - Training - Staff In-Service - 58A-5.0191(2) FAC

Based on record review and interview the facility failed to provide required in-service training for direct care staff (C) one of four staff reviewed within 30 days of employment.

Findings included:

Record review of Staff C on at 11:37 am revealed a date of hire as . Specific date unknown, per the administrator. Direct care staff training not available in file for the minimum requirement of 1hour in-service training within 30 days of employment that covers the following subjects:
1. Reporting major incidents.
2. Reporting adverse incidents.
3. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation.
4. Resident rights in an assisted living facility.
5. Recognizing and reporting resident , neglect, and , .

The administrator was interviewed at 12:14 pm on and confirmed that the required minimum trainings for Staff C was not complete nor in their record at time of survey. She stated that the trainings were given as the staff works at another property.

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932380	**06/12/2017**
NAME OF PROVIDER OR SUPPLIER **BAY PINES MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **10591 BAY PINES BLVD.** **SAINT PETERSBURG, FL 33708**	

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

Based on observation, record review and interview, the facility failed to maintain the required admission and discharge log listing the admission and discharge dates of 1 of 3 current and 1 former residents of the facility (Residents #1).

Findings included:

On beginning at 7:45 AM, the facility was observed to have two ALF residents residing at the facility, one in the hospital and 4 independent living residents.

During an interview with the facility administrator on at 9:30 AM, the administrator confirmed the facility's previous owner did not maintain a log and was unaware of resident #1's admission to the ALF side. She did not maintain a log and wrote in the log as surveyor explained the concern.

Class III