STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964525	06/06/2017
NAME OF PROVIDER OR SUPPLIER **BROOKDALE CENTRE POINTE BOULEVARD**	STREET ADDRESS, CITY, STATE, ZIP CODE **1980 CENTRE POINTE BLVD.** **TALLAHASSEE, FL 32308**	

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

0000 - Initial Comments

An unannounced biennial survey with specialty license for Limited Nursing Services was conducted from . . . . through . . . . at Brookdale Centre Pointe Boulevard, license number 9057. At the time survey there were deficienices identified.

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on staff interview and record review, the facility failed to ensure staff obtained a free of communicable . . . . . statement within 30 days of hire for 3 of 3 staff sampled (A, B, C), and failed to ensure a examination for 1 of 3 sampled staff (A).

Findings include:

The employee files for staff A (the Health and Wellness Director), staff B and C (both resident assistants) were reviewed on . . . . . Staff A was hired on . . . . . and her employee file revealed no written statement from a healthcare provider stating she was free of communicable . In addition, there was no documentation of a . . . . . examination being performed.
The employee file for Staff B, hired , and Staff C, hired on , were reviewed and also revealed that neither contained a written statement stating they were free of communicable . . . . . .

An interview was conducted with the Executive Director on at 10:00am. She confirmed that none of the sampled staff had a communicable statement and Staff A did not have a . . . . . screening on file.

Class III

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

Based on staff interview and record review, the facility failed to ensure staff completed elopement training for 1 of 3 staff (A), incident reporting training for 3 of 3 staff (A, B, C), resident rights training for 1 of 3 staff (A), and nutritional and safe food handling for 3 of 3 staff (A, B, C).

Findings include:

The employee files for staff A (the Health and Wellness Director), staff B and C (both resident assistants) were reviewed on . Staff A was hired on . Her electronic training record revealed no required training for elopement nor resident rights training. In addition, staff A only completed 17 minutes of the 1 hour requirement for incident reporting and 35 minutes of the 1 hour requirement for nutrition

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SUMMARY STATEMENT OF DEFICIENCIES
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and safe food handling. Staff A was observed on feeding a resident during lunch. The electronic training record for Staff B and Staff C were reviewed. Staff B was hired , and Staff C was hired . Neither staff had any incident reporting training. Both staff B and C only received 25 minutes of the required 1 hour training for nutrition and safe food handling.

An interview was conducted with the Executive Director on at 10:00am. She confirmed the required trainings were not completed for staff A, B, and C.

Class III

0090 - Training - - 58A-5.0191(11) FAC

Based on staff interview and record review, the facility failed to ensure required policy and procedure training for ( ) was completed for 1 of 3 staff sampled (A).

Findings include:

The employee file for staff A (the Health and Wellness Director) was reviewed on . Staff A was hired on . The electronic training record revealed no required training for policy and procedures.

An interview was conducted with the Executive Director on at 10:00am. She confirmed training had not been completed.

Class III