STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964467	**06/06/2017**
NAME OF PROVIDER OR SUPPLIER **HIGHLAND PLACE**	STREET ADDRESS, CITY, STATE, ZIP CODE **700 MEDICAL COURT EAST** **INVERNESS, FL 34452**	

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

0000 - Initial Comments

An unannounced biennial licensure survey was conducted at Highland Place Senior Living (License # 8991), on , 2017 through , 2017. Deficient practice was identified at the time of the survey.

0007 - Admissions - Criteria - 429.26(11) FS; 58A-5.0181(1) FAC

Based on record review and interview, the facility failed to obtain written informed consent at the time of admission for 27 of 27 residents that unlicensed staff will be providing assistance with self-administration of medications.

Findings:

A resident record review was completed on at 12:48 PM. During the resident record review for 2 of 2 residents (Resident #1 and #4) no evidence was found in the admission record or medical record of a signed consent concerning unlicensed staff assisting with self-administration of medications.

An interview was conducted with the Regional Director of Care Services on at 1:00 PM. When asked about the consent form concerning unlicensed staff assisting with self-administration of medications being part of the admissions record, she stated she was sure they had a document that the residents sign. She stated she would look for it and bring it to the surveyor when she had located it.

On at 3:15 PM, a follow-up interview was conducted with the Regional Director of Care Services. She confirmed that they currently did not have the consent form as part of the admission paperwork but that they would be including that from now on.

On at 4:05 PM, an interview was conducted with the Resident Care Manager. She confirmed, with a consent form in hand, that the facility had just implemented the use of a consent form they had devised to inform new residents that unlicensed staff would be providing assistance with self-administration. She stated we just received two new residents and used the consent form. She confirmed that prior to the day of the survey ( ) they did not have the consent form as part of the admission paperwork for all of the current residents.

Class III

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

Based on record review and interview, the facility failed to ensure direct care staff received In-Service Training for Incident Reporting; Safe-Food Handling, and Resident Rights within 30 days of employment

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for 3 of 3 staff (Staff A, B and C).

Findings:

An employee record review was conducted on . . . . at 2:45 PM for Staff A, which revealed no evidence of Incident Reporting Training.

An interview was conducted with Resident Care Manager on . . . . at 3:50 PM. She stated she could not locate evidence that Staff A received Incident Reporting training.

An employee record review was conducted on at 3:20 PM for Staff B, which revealed no evidence of Staff B receiving Safe Food Handling Training.

An interview was conducted with Resident Care Manager on . . . . at 3:50 PM. She stated she could not locate evidence that Staff B received Safe Food Handling training.

An employee record review was conducted on at 4:10 PM for Staff C, which revealed no evidence of Staff C received Resident Rights Training.

An interview was conducted with Resident Care Manager on . . . . at 4:36 PM. She stated she could not locate evidence that Staff C received Resident Rights training.

Class III

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS

Based on record review and interview, the facility failed to ensure that 3 of 3 staff (Staff A, B and C) completed an Attestation of Compliance every 5 years.

Findings:

An employee record review of Staff A, Staff B, & Staff C was completed on . . . . at 1:45 PM which revealed no evidence of an attestation of compliance form in any of the 3 staff records reviewed.

An interview was conducted with the Resident Care Manager on . . . . at 2:05 PM. She stated that during a recent meeting with the Corporate Office the Attestation of Compliance Form had been identified as something that needed to be completed by staff as part of the Level II Background

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Screening Process. She confirmed they had obtained the form but that no staff had completed one at this time.

Unclassified