STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911795	**06/26/2017**
NAME OF PROVIDER OR SUPPLIER **GOOD SAMARITAN SOCIETY-FLORIDA LUTHERAN**	STREET ADDRESS, CITY, STATE, ZIP CODE **450 NORTH MCDONALD AVENUE DELAND, FL 32724**	

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

0000 - Initial Comments

An unannounced abbreviated biennial assisted living facility survey was conducted on .

Good Samaritan Society-Florida Lutheran (Lic. #5455) had license deficiencies at the time of the visit.

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

Based on staff interview and employee record reviews the facility failed to submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable for 3 of 3 sampled employees (Employee A, B, and C).

The findings include:

Employee record reviews were completed for Employees A, who was hired on . Employee A did not have any documentation in her employee record from her physician stating that she is free from communicable .

Employee record reviews were completed for Employees B, who was hired on . Employee B did not have any documentation in her employee record from her physician stating that she is free from communicable .

Employee record reviews were completed for Employees C, who was hired on . Employee C did not have any documentation in her employee record from her physician stating that she is free from communicable , and she did not have any record of a negative ( ) examination, or any test being administered.

On at 12:04 PM Human Resources Supervisor (HRS) was given a list of missing documentation from the files for Employees A, B, and C. HRS stated that she would look for the information to see if it was available.

On at 1:58 PM Interview completed with Human Resource Supervisor (HRS)and she confirmed

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that none of the items surveyor had requested are available in any of the employees files. HRS retrieved the medical record off the table for Employee C to double check again for her results, and she confirmed again that there were no records in the employees file.

Class III

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

Based on employee record reviews and staff interview the facility failed to ensure that 3 of 3 sampled employees (Employee's A, B, and C) were educated on reporting adverse incidents and/or ADL and behavioral needs training.

The findings include:

Employee record review was completed for Employee A, who was hired on , and she did not have documentation of receiving training on reporting adverse incidents or ADL and behavioral needs training.

Employee record reviews were completed for Employees B, who was hired on . Employee B did not have any documentation in her employee record for ADL and behavioral needs training.

Employee record reviews were completed for Employees C, who was hired on . Employee C did not have any documentation in her employee record for ADL and behavioral needs training.

On at 12:04 PM Human Resources Supervisor (HRS) was given a list of missing documentation from the files for Employees A, B, and C. HRS stated that she would look for the information to see if it was available.

On at 1:58 PM, During an interview completed with Human Resources Supervisor, she confirmed that none of the items surveyor had requested are available in any of the employees files.

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0082 - Training - / - 58A-5.0191(3) FAC

Based on employee record reviews and staff interview the facility failed to complete a one-time education course on and , including the topics prescribed in the Section 381.0035, F.S. for 3 of 3 sampled employees (Employee A, B, and C).

The findings include:

Employee record reviews were completed for Employees A, who was hired on . Employee A did not have any documentation in her employee record for / training.

Employee record reviews were completed for Employees B, who was hired on . Employee B did not have any documentation in her employee record for / training.

Employee record reviews were completed for Employees C, who was hired on . Employee C did not have any documentation in her employee record for / training.

On at 12:04 PM Human Resources Supervisor (HRS) was given a list of missing documentation from the files for Employees A, B, and C. HRS stated that she would look for the information to see if it was available.

On at 1:58 PM Interview completed with Human Resource Supervisor (HRS)and she confirmed that none of the items surveyor had requested are available in any of the employees files.

Class III

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

Based on employee record reviews and staff interview the facility failed to provide at least one hour of training in the facility's policies and procedures regarding within 60 days after hire for 3 of 3 sampled employees (Employee A, B, and C).

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The findings include:

Employee record reviews were completed for Employees A, who was hired on . . . . . Employee A did not have any documentation in her employee record for the facilities policies and procedures regarding . . .

Employee record reviews were completed for Employees B, who was hired on . Employee B did not have any documentation in her employee record for the facilities policies and procedures regarding .

Employee record reviews were completed for Employees C, who was hired on . . . Employee C did not have any documentation in her employee record for the facilities policies and procedures regarding . . .

On at 12:04 PM Human Resources Supervisor (HRS) was given a list of missing documentation from the files for Employees A, B, and C. HRS stated that she would look for the information to see if it was available.

On . . . at 1:58 PM Interview completed with Human Resource Supervisor (HRS)and she confirmed that none of the items surveyor had requested are available in any of the employees files.

Class III

0092 - Food Service - General Responsibilities - 58A-5.020(1) FAC

Based on record review and staff interview, the facility failed to have the food service designee complete the required 3 hours of annual continuing education units (CEU).

The findings include:

The Director of Food and Nutrition was interviewed on at 12:44 p.m. He stated he was the food service designee and was responsible for the day to day supervision of food services. He stated he

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was a certified dietary manager and had the 5 year certificate but did not have the annual 3 census. He stated the Human Resources director looked through his file and could not find updated training.

Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on observation, record review and resident and staff interview, the facility failed to provide the full menu items affecting Residents 3, 7 & 8, failed to keep a 6 month substitution log, failed to have portion sizes for staff to follow, and failed to have an adequate food and water supply (affecting facility census-23 residents).

The findings include:

On at 11:40 a.m. the menu posted downstairs for lunch today was for rotisserie turkey or sloppy Joe sandwich; no other items were posted for this day. Employee A, a Caregiver on at 11:40 a.m. stated she would be preparing and serving the meal today from a steam table for the residents downstairs. She stated that each morning the residents get a menu for that day and they pick out their lunch and dinner meal. The menus are collected and that is what they follow. Employee A stated the menu did not have portion sizes on it but she knew how much each resident ate so that is what she would put on the plate.

The individual resident menu for lunch revealed chicken noodle soup, rotisserie turkey , Sloppy Joe Sandwich, black beans with tomato salad, steamed carrots, dinner roll and pumpkin pie. Each resident was to circle what they wanted.

On at 11:45 a.m., rotisserie turkey , sloppy joe sandwich, steamed carrots, mashed potatoes and gravy was on the steam table. Black beans with tomato salad was not on the steam table. Also, pumpkin pie was not available either but substituted with apple or cherry pie.

Resident #7 and #8 had requested black beans with tomato salad on their individual menu.

Resident #3 was interviewed on at 1207 p.m. She stated that they substitute food items regularly since she has been here since 2016. They did not give them pumpkin pie like on the menu.

Resident #8 was interviewed on at 1208 pm. He wanted the black beans and pumpkin pie . We never know what we are going to get until they put it in front of us. They substitute all the time.

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Review of the emergency food supply list revealed missing items on hand. The facility did not have 3 cases of creamed beef, 3 cases of Sloppy Joe with Meat, 50 pounds of powdered milk, 1 case of breadsticks, 6 cans of 46 ounces of split , . . . soup and 72 gallons of water.

An interview was conducted with the Director of Food and Nutrition on . . . . . at 12:44 p.m. He confirmed that the menu did not have portion sizes on it and they did not have a 6 month substitution menu. He also confirmed he did not have everything on the emergency food list that he should have.

Class III

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

Based on record review and staff interview, the facility failed to maintain personnel records for 1 of 4 sampled employees, Employee D

The findings include:

The Human Resources Director on . . . . . at 11:15 a.m. was asked for the personnel record for Employee D, a Registered Nurse. She responded she could not find it. She stated that the employee transferred over here from another facility in . . . . . 2016. The previous person in charge of personnel records no longer works here and the records were not maintained in an orderly fashion.

Class III

N278 - LNS - Records - 58A-5.031(3) FAC

Based on record review and staff interview, the facility failed to ensure that monthly nursing assessments were completed for 2 of 2 residents, Residents #1 and #9 who were receiving Limited Nursing Services.

The findings include:

1. On at 9:45 a.m., the facility manager (a Licensed Practical Nurse) was interviewed regarding their Limited Nursing Services (LNS) Protocol. She stated that she did not like the way the previous person was documenting services so she started a new way of doing it and used a new date in . . . . 2017 as starting services. She stated that two residents , Resident #1 and #9 were on services when she began working here. She believed that the Registered Nurse (Employee D) was performing

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monthly nursing assessments for the two LNS residents.

Review of Resident #1's record revealed the facility nurse providing LNS services of monthly injections going back to of 2017. There were no monthly nursing assessments seen in her record. There was a functional assessment done on for this resident but it was not a full nursing assessment to include the LNS services. The resident's health assessment revealed she needed assistance with self-administration of medications.

The facility manager on at 950 confirmed that monthly nursing assessments were not done for this resident.

2. Interview with Employee B was conducted on at 9:55 a.m. She stated she worked part time. They call her when they need her. She stated that she mainly performs the Functional Assessments for new admissions to the facility. She has worked with LNS residents in the past but does not do the monthly nursing assessments.

3. Resident #9 was receiving LNS services for performing sugar checks. Her Health Assessment revealed she had type II and needed help with medications. She had a physician order for sugar checks monthly. Facility nurses were performing monthly sugar checks and documenting them in the progress notes. However, monthly nursing assessments were not seen.

4. The facility manager on at 10 a.m. confirmed that monthly nursing assessments were not done for Resident #9 either.

Class III