STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967845	**08/07/2017**
NAME OF PROVIDER OR SUPPLIER **TRANQUILITY HAVEN, LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1346 WILDERNESS LANE** **TITUSVILLE, FL 32796**	

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

0000 - Initial Comments

A Complaint Investigation #2017005014 was conducted on . Tranquility Haven LLC. Assisted Living, License #11805 had deficiencies at the time of the visit.

0008 - Admissions - Health Assessment - 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on resident record review and interview the facility failed to obtain a completed AHCA Form 1823 Resident Health Assessment completed by the healthcare provider within 30 calendar days of admission into the facility for 2 of 5 sampled resident (#1 & #4).

Findings:

1. Record review for resident #1 revealed there was no completed AHCA Form 1823 Health Assessment completion by a healthcare provider within 30 days of admission. The resident's admission date was .

2. Record review for resident #4 revealed an incomplete AHCA Form 1823 Health Assessment dated missing information or omitted information regarding section C, page 2 asking about communicable , bedridden, any , 3, or 4 pressure sores, pose danger to self or others & requiring any 24 hour nursing or care?

On at 4:30 PM, an interview with the Administrator who confirmed the findings.

Class III

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

Based on personnel record review and interview, the facility failed to ensure that 3 of 5 sampled staff (B, D & E) had documentation of in-service training for staff who provide direct care to the residents within 30 days of employment.

Findings:

Personnel record review for Staff B revealed date of hire . Further review revealed no documentation of the following in-service trainings required within 30 days of hire:

1. 1 hour providing assistance with Activities of Daily Living (ADLs) & Behavioral needs training
2. 1 hour of Elopement response training

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3. 1 hour of Emergency Preparedness & Evacuation training
4. 1 hour of Incident reporting/Adverse Incident reporting training
5. 1 hour of Resident rights training and;
6. 1 hour Recognizing/Reporting , Neglect & , training

2. Staff D's personnel record review revealed no documentation of in-service trainings required within 30 days of hire. Date of hire .

1. 1 hour of Elopement response training
2. 1 hour of Emergency Preparedness & Evacuation training
3. 1 hour of Incident reporting/Adverse Incident reporting training

Staff E's personnel record review revealed no documentation of in-service trainings required within 30 days of hire. Date of hire .

1. 1 hour of Emergency Preparedness & Evacuation training

On at 4 PM, an interview with the Administrator who confirmed the findings.

Class

0162 - Records - Resident - 58A-5.024(3) FAC

Based on resident record review and interview the facility failed to ensure that 1 of 5 sampled residents (#1) had a recorded weight at the time of admission as required. 2. There was no AHCA Form 1823 Resident Health Assessment and there was no documentation of the informed consent for assistance with self-administration of medication for 1 of 5 sampled resident (#4) pursuant to Rule 58A-5.0181 Florida Administrative Code.

Findings:

1. Resident #1's record review revealed no documentation of any weight as required for residents receiving assistance with activities of daily living. There was no weight log or AHCA Form 1823 Resident Health Assessment available for review.

2. Resident #4's record review revealed no documentation of the informed consent for assistance of

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self-administration of medications as required. The resident was admitted to the facility on .

On at 4:30 PM, an interview with the Administrator who confirmed the findings.

Class III

0167 - Resident Contracts - 58A-5.025 FAC

Based on resident record review and interview the facility failed to ensure documentation of a resident contract with the required information for the daily, weekly, or monthly rate for 3 of 5 sampled residents (#1, #3 & #5) as required pursuant to Section 429.24 Florida Statutes.

Findings:

1. Resident #1's record review revealed an incomplete contract signed on missing the monthly rate to reside in facility.

2. Resident #3's record review revealed an incomplete contract signed on missing the monthly rate to reside in the facility.

3. Resident #4's record review revealed an incomplete contract that was not signed and dated and was missing the monthly rate to reside in the facility.

On at 4:30 PM, an interview with the Administrator who confirmed the findings.

Class III

Z821 - Reporting Requirements; Electronic Submission - 59A-35.110 FAC

Based on the facility's incident reporting, Law Enforcement report and interview the facility failed to submit a 1-day adverse incident report followed by failing to submit a full 15-day adverse incident report via electronic mail or facsimile pursuant to 58A-5.0241 Florida Administrative Code for 1 of 1 sampled resident (#4) when law enforcement officer was called to the facility for an elopement incident resulting removal from the facility to the local hospital.

Findings:

Resident #4's record review revealed an elopement incident that occurred on . Brevard County Law Enforcement agency was called to the facility to conduct an investigation. There was no

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documentation that an adverse incident report was filed with the Agency for Health Care Administration (AHCA).

On at 4 PM, an interview with the Administrator who confirmed the finding.

Unclassified