STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965270	08/21/2017
NAME OF PROVIDER OR SUPPLIER **MAGNOLIA MANOR OF PALM COAST,**	STREET ADDRESS, CITY, STATE, ZIP CODE **35 SANDS LANE** **PALM COAST, FL 32137**	

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

0000 - Initial Comments

An unannounced biennial licensure survey was conducted at Magnolia Manor of Palm Coast on 21, 2017. Magnolia Manor of Palm Coast (license #9708) had deficiencies found at the time of the visit.

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

Based on observation, record review, and staff interview, the facility failed to ensure an updated, complete and accurate AHCA 1823 Health Assessment was obtained for 1 of 2 sampled residents. (Resident #2)

The findings include:

Observation of the resident on at 8:50 AM found she needed assistance with all activitiesof daily living.

Record review for Resident #2 found she was admitted to the facility on and admitted into Hospice care at the facility on . Record review of the AHCA 1823 Health Assessment (AHCA 1823) found Resident #2 had an AHCA1823 based on a health exam. Further record review of the ACHA 1823 found Resident #2 was assessed as needing supervision with ambulation and eating and needing assistance with all other activities of daily living. Further record review found a second AHCA 1823 in the resident record. Review of the AHCA 1823 found page 1 under Nursing/Treatment listed "Hospice." Page 2 documented the resident needed assistance with all activities of daily living. Question D. "In your professional opinion, can this individual's needs be met in an assisted living facility, which is not a medical, nursing or , facility? Was checked "No". Page 4. "Date of Examination" was left blank.

The findings were confirmed during an interview with the Manager on at 1:00 PM.

Class III

0052 - Medication - Assistance with Self-Admin - 58A-5.0185 (3)

Based on observation, staff interview and record review, the facility failed to ensure that unlicensed staff did not assess and give as needed medication to 1 of 2 sampled residents not capable of requesting the medication. (Resident #2)

The findings include:

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At at 8:50 AM Employee A, a med tech, was observed assisting Resident #2 with self-administration of medication.

The labels on the bottles of medication the facility had for Resident #2 were reviewed. The resident was found to have a bottle of , 0.5 milligrams (MG) tablets with orders to take 1 tablet by mouth every three hours as needed, / , 5-325 MG take 1 tablet by mouth every 6 hours as needed for pain.

During an interview with Employee A on at 9:13 AM, stated she gave Resident #2 the as needed , on at 10:45 PM because she was agitated. She stated she called the Hospice nurse and then gave the medication. She confirmed a nurse did not come in the facility to assess Resident #2's condition prior to giving the medicatin

Record review of the Medication Observation Record's (MOR) for Resident #2 found Employee A initialed she gave the medication on . She also initialed she gave the , on and . The , was also initialed as given on and . There was no evidence in the record the individual who initialed giving these medications was a nurse.

The findings were confirmed with the Manager on at 1:00 PM. She confirmed the resident could not ask for the medication.

Class III

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on staff interview and record review, the facility failed to ensure the individual serving as Manager of the facility satisfied the core training and competency requirements.

The findings include:

On entering the facility on at 8:00 AM the caregiver at the facility, Employee A was asked to contact the Administrator. She stated Employee B was the Manager. Employee B was at the facility and stated that she was the Manager. She stated the Administrator lives in Ohio and visits two times a year. She provided a letter documenting she was appointed as the Manager effective .

The Manager/Employee B was asked for proof of her core training on at 11:00 AM. She could not find the training. She went home and came back with her test score documentation from a university showing she took the core test and did not pass.

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Class III

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

Based on employee record review and staff interview, the facility failed obtain a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable and and failed to obtain evidence of a negative . . . . . ( ) examination on an annual basis for 1 of 4 employees. (Employee D)

The findings include:

Record review for Employee D/Administrator found no evidence of her date of hire. Further record review also found no evidence of a written statement from a health care provider documenting the Administrator did not have any signs or symptoms of a communicable or evidence of a negative . . . . . examination.

The findings were confirmed during an interview with the Manager on . . . . at 1:25 PM. She stated she did not have the information.

Class III

0079 - Staffing Standards - Levels - 58A-5.019(3) FAC

Based on record review and staff interview, the facility failed to ensure a minimum staffing of 212 hours per week for the 6 residents residing at the facility.

The findings include:

Record review of the facility schedule with the Manager/Employee B on . . . . at 8:30 AM, found the facility schedule had staff scheduled to work 193.5 hours each week. During an interview with the Manager at the time of the review, she stated she thought that the facility was required to have employee working 168 hours a week for 6 residents.

Class III

0080 - Training - Core & Competency Test - 429.52(1-2) FS; 58A-5.0191(1) FAC

Based on record review and staff interview, the facility failed to ensure the Administrator of the facility

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received 12 hours of continuing education in topics related to Assisted Living every two years.

The findings include:

Record review of the employee file for the Administrator/Employee D found the most recent training the Administrator received was on .

The findings were confirmed during an interview with the Manager on at 1:25 PM. She was not able to provide evidence of more recent training.

Class III

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

Based on record review and staff interview, the facility failed to ensure 3 of 4 employees received one hour of training in facility elopement response procedures and emergency procedures within 30 days of hire. (Employee A and C)

The findings include:

Record review for Employee A (hired) revealed no evidence Employee A received training in received one hour of training in facility elopement response procedures and emergency procedures within 30 days of hire.

Record review for Employee B (hired) revealed no evidence Employee B received training in received one hour of training in facility elopement response procedures and emergency procedures within 30 days of hire.

Record review for Employee C (hired) revealed no evidence Employee C received training in received one hour of training in facility elopement response procedures and emergency procedures within 30 days of hire.

The findings were confirmed during an interview with the Manager or on at 1:25 PM. She was not able to locate evidence of the training.

Class III

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

Based on employee record review and staff interview, the facility failed to ensure 3 of 4 sampled employees received a minimum of 1 hour of training in the facility's policy and procedures regarding Do No Orders, within 30 days of employment. (Employee A, B, and C)

The findings include:

Record review for Employee A (hired) revealed no evidence the employee received a minimum of 1 hour of training in the facility's policy and procedures regarding .

Record review for Employee B (hired) revealed no evidence the employee received a minimum of 1 hour of training in the facility's policy and procedures regarding .

Record review for Employee C (hired) revealed no evidence the employee received a minimum of 1 hour of training in the facility's policy and procedures regarding .

The findings were confirmed during an interview with the Manager tor on at 1:25 PM. She was not able to locate evidence of the training.

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 ensure at personnel records were maintained with compliance of Level II background screening for 1 of 4 sampled employees. (Employee D/Administrator)

The findings include:

Record review of the employee file for the Administrator/Employee D found the most recent Level II background screening had an eligible date of . An interview with the Manager of the facility on at 1:00 PM confirmed the findings. She stated the screening was the most recent one she had at the facility.

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Record review of the background screening system found the Administrator had a hire date of and a last screening date of , but this was not included in the employee record at the time of the survey.

Class III

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

Based on record review and staff interview, the facility failed to obtain resident records' with complete and accurate health assessments, weights, physician orders, and resident contracts for 1 or 2 sampled residents. (Resident #2)

The findings include:

Record review for Resident #2 found she was admitted to the facility on . Further record review revealed the resident contract was not in the resident record. In an interview with the Manager on at 1:00 PM, she stated she could not locate the contract.

Further record review for Resident #2 found the most recent weight in the residents record was recorded on . During an interview with the Manger on at 1:00 PM, she stated Resident #2 refused to have her weight taken on . She stated the facility did not have any more recent weights. She further stated they do not get them because the resident cannot stand.

Record review for Resident #2 revealed she had full bed rails. During an interview with Employee An on at 10:00 AM, she confirmed the resident uses the full bed rails. The Manager was asked for the physician orders several times on . On at 1:00 PM, the Manger stated she was still waiting for Hospice to send her the orders. They were not in the resident's file at the time of the survey.

Class III

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

Based on record review, and staff interview, the facility failed to register and update the agency

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background screening clearing house for 2 of 4 sampled employee's currently working at the facility. (Employee B and C)

The findings include:

Record review of the employee file for Employee B found she was hired on . A review of the Agency's Background screening clearing house website on at 6:30 AM found Employee B was not listed.

Record review of the employee file for Employee C found she was hired on . A review of the Agency's Background screening clearing house website on at 6:30 AM found Employee C was not listed.

During an interview with the Manager on at 1:00 PM, she was informed that she and Employee C were not showing as employees of the facility on the background screening website. She stated she did not have any additional information to provide.

Unclassified

Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on record review and staff interview, the facility failed to obtain a new Level II background screening for 1 of 4 sampled employees (Employee C) whose Level II background screening was conducted between , 2009 and , 2011.

The findings include:

Record review for Employee C found she was hired at the facility on and her most recent Level II background screening had a eligibility date. During an interview with the Administrator on at 1:00 PM, she stated that she did not have a more recent Level II Background screen.

Record review of the background screening system did not find a more recent Level II background screening for Employee C.

Unclassified