STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11943128	09/21/2017
NAME OF PROVIDER OR SUPPLIER **ST MARY'S HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **718 W. WINTER PARK STREET** **ORLANDO, FL 32804**	

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

0000 - Initial Comments

The re-licensure survey was conducted on . St. Mary's Home Assisted Living Facility with Limited Mental Health (LMH), License# 4860 had deficiencies at the time of the visit.

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(5) FAC

Based on personnel record review and interview, the facility failed to ensure that 2 of 2 sampled staff (A & B) completed the 2 hour annual continued education training on providing assistance with self-administered medications and safe medication practices in an assisted living facility pursuant to Section 429.256(1) (b) Florida Statutes.

Findings:

1. Staff A's personnel record review revealed date of hire was missing the required annual 2-hour update documented training for assistance with self-administration of medication training was not completed for year 2016 & 2017. The last 2-hour medication training update completed on .

2. Staff B's personnel record review revealed date of hire was missing the required annual 2-hour update documented training for assistance with self-administration of medication was not completed for year 2016 & 2017. The last 2-hour medication training update completed on .

On at 3 PM, an interview with the Administrator who confirmed the findings.

Class III

0181 - Emergency Plan Approval - 58A-5.026(2) FAC

Based on review of the facility's Comprehensive Emergency Management Plan (CEMP) and interview, the facility failed to have documentation the CEMP was reviewed and or if there were changes submitted to the local emergency agency for review and approval according to 58A-5.026(2)(c) (1) FAC.

Findings:

On at 11 AM, reviewed of the most recent CEMP dated was unsatisfactory of an Unsatisfactory. The administrator stated he is in the process of working with the office of Orange County Emergency Management to come into compliance.

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

On at 3 PM, an interview with the Administrator whom confirmed the finding.

Class III

Z813 - Results of Screening & Notification In File - 59A-35.090(3)(c), FAC

Based on the review of Background Clearinghouse (BGS) website, personnel record review and interview, the facility failed to maintain a copy of the Level 2 Background screening results for 1 of 2 sampled staff (B) in the personnel file pursuant to 59A-35.090(2) Florida Administrative Code.

Findings:

On at 1 PM, review of the BGS Clearinghouse website revealed that staff B (date of hire) has an eligible Level 2 Background Screening result but no copy or no documentation was found in staff B's personnel record.

On at 3 PM, an interview with the Administrator who confirmed the findings.

Unclassified