STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968262	**10/09/2017**
NAME OF PROVIDER OR SUPPLIER **GARDEN OASIS ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **515 HICKORY LAKE DR** **BRANDON, FL 33511**	

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

0000 - Initial Comments

Assisted Living Facility

An unannounced biennial state relicensure survey was conducted on .

The Garden Oasis ALF, Assisted Living Facility, (License # 12249), had deficiencies at the time of the visit.

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

Based on record review and interview, the facility failed to ensure that 1 of 3 direct care staff (Staff B) in a facility with 5 residents received in-service training required within 30 days of hire in resident behavior and needs and providing assistance with the activities of daily living.

Findings included:

Three employee records were selected for review on beginning at 10:30am. Per record review, Staff B was hired as a Resident Aide/Medication Tech on and provides direct personal care services to 5 current residents of the Assisted Living Facility.

Per review of employee training records, there was no documentation of Staff B completing training in resident behavior and needs and providing assistance with the activities of daily living.

Per interview conducted with the Administrator on at 2:00pm, the Administrator acknowledged awareness of the need for training per statute and rule requirements.

Class III

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

Based on record review and interview, the facility failed to ensure that 1 of 3 direct care staff (Staff B) in a facility with 5 residents completed a one-time education course on / , , (/) required within 30 days of hire.

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

Findings included:

Three employee records were selected for review on beginning at 10:30am. Per record review, Staff B was hired as a Resident Aide/Medication Tech on and provides direct personal care services to 5 current residents of the Assisted Living Facility.

Per review of employee training records, there was no documentation of Staff B completing an educational course on and .

Per interview conducted with the Administrator on at 2:00pm, the Administrator acknowledged awareness of the training requirements.

Class III

0091 - Training - Documentation & Monitoring - 58A-5.0191(12) FAC

Based on record review and interview, the facility failed to ensure that required training certificates for three of three sampled staff (Staff A, Staff B and Staff C) are documented in the facility's personnel files and include title and subject matter/agenda of the training, trainee's name, dates of participation, location of the training, number of hours of the training, and training provider's name, dated signature and credentials, including professional license number, if applicable.

Findings included:

Three employee records were selected for review on beginning at 10:30am. Per record review, Staff A was hired as a Resident Aide/Medication Tech on ; Staff B was hired as a Resident Aide/Medication Tech on ; Staff C was hired as a Resident Aide/Medication Tech on . All 3 employees provide direct personal care services to 5 current residents of the Assisted Living Facility.

Per review of employee training records, Staff A, Staff B, & Staff C's files contained 1-page checklists with dates next to topics as follows:

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

Control: A . . . ; B . . . ; C . . .
Activities of Daily Living & Behavioral Needs training: A . . . . . ; B none; C . . . . . training: A ; B none; C
Elopement Response training: A . . . . ; B . . . ; C . . . .
Emergency Preparedness and Evacuation training and Incident Reporting training: 1 hour: "Major Incidents & Emergency" A . . . . ; B . . . ; C . . . .
Residents' Rights and Recognizing & Reporting , Neglect, & , : A ; B ; C . .
Facility's policies and procedures regarding ( ): A ; B ; C . . .
Nutrition & Safe Food Handling: A ; B ; C

There were no certificates documenting required staff in-service training specifics as required.

Per interview conducted with the Administrator on at 2:00pm, the Administrator acknowledged awareness of the need for training certificates per documentation requirements.

Class III