STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968931	**01/17/2018**
NAME OF PROVIDER OR SUPPLIER **VITALITY RESORT ALF LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1258 ERMINE ST** **PORT SAINT LUCIE, FL 34953**	

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

0000 - Initial Comments

A Relicensure survey was conducted on at Vitality Resort ALF, License #12786. The facility had deficiencies at the time of the visit.

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

Based on record review and interviews, the faciity failed to:
1) obtain a new Health Assessment (AHCA Form 1823) based upon a face-to -face examination by an approved health care provider, within 60 days before admission to the facility for 1 of 3 residents whose Health Assessments were reviewed (Resident #6).
2) Ensure current Health Assessment (AHCA Form 1823) is completed accurately and in its entirety for 1 of 3 residents (Resident #1).

The findings included:

1. Resident #6 was admitted to the facility on . The initial and most current assessment contained in Resident #6's medical record was completed on . This assessment was completed more than 90 days prior to admission, which exceeds the regulatory time frame of no more than 60 days prior to admission.

2. Resident #1's Health Assessment (AHCA Form 1823), dated , contains the following issues:
a) Facility address, telephone number and name of contact person is not listed on the Health Assessment;
b) The Assessment does not include the resident's weight on the top of Page 1;
c) Section 1 areas related to the Resident 's Medical History and Diagnoses, Physical/Sensory Limitations, /Behavioral Status, Nursing/Treatment/ Services have no information listed, only a note "see attached." There was no other documentation containing further information attached to the assessment.
f) Section 1, Part B does not document the Resident's Dietary Instructions.
g) Section 2-B, Part B does not contain a check mark to indicate Resident needs help with Medication, but there is a check mark indicating resident needs Medication "Administration", which, according to the Facility Manager, is not accurate, as the Resident is capable of self-administering with assistance.
h) Section 3 is missing from the Health Assessment.

During interview conducted with the Facility Manager on at 3:00 PM, he acknowledged that a new health assessment for Resident #6 should have been completed at the time of admission. He also

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acknowledged the need for a complete and accurate health assessment for Resident #1. He stated that he would ensure that Section 3 of the health assessment be completed to reflect services offered or arranged by the facility for each of the resident's health assessments.

Class III

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on resident record review and staff interview, the facility failed to acquire a new health assessment (AHCA Form 1823) for 1 of 3 residents after a significant change related to resolution of , and a change in medication assistance (Resident #3).

The findings included:

A review of the current Health Assessment for Resident #3, dated , documents resident has or greater , on right and left . The assessment also documents Resident #3 needs help with medications, but goes on to document Resident #3 is able to administer medications without assistance.

Interview with Facility Manager on at 3:00 PM reveals the current Health Assessment for Resident #3 no longer accurately reflects the health status of this resident. The Manager stated, "[Resident #3's] , have been resolved for quite a while...Resident #3 does not self-administer his medications; we keep the medications secured and assist him with taking his medications."

Class III

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

Based on observation, interview and record review, Staff A failed to follow proper procedure for assisting with self administered medications, as outlined in the state required annual training for staff who assist residents with self-administered medications, for 1 of 1 resident observed for assistance with medications (Resident #5)

The findings included:

On at 12:07 PM, an observation was made of Staff A providing assistance with self-administered

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medications to Resident #5. Staff A sanitized her hands and performed the following steps:
1) Staff A removed medication packet from locked cabinet;
2) Staff A compared the packet with the Medication Observation Record;
3) Staff A removed the medication from the medication packet and placed it into small medication cup while in the kitchen;
4) Staff A took the medication cup to the Dining . . . handed the cup to Resident #5, who was sitting at the dining . While handing the cup to Resident #5, Staff A said, "Here is your medication."
5) Staff A observed Resident #5 swallow the medication; and
6) Staff A initialed the MOR immediately after the medication was given to the resident.

According to the proper procedure outlined in the state required annual training for staff who assist residents with self-administered medications, staff must:
1) Take the properly dispensed and labeled medication from where it is stored and bring it to the resident;
2) In the presence of the resident, read the label.
Staff A did not follow the above 2 steps before dispensing the medication into the medication cup and handing it to Resident #5.

On . . . at 3:00 PM, the Administrator acknowledged Staff A did not follow the proper procedure while assisting Resident #5 with his medication.

Class III

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

Based on employee record review and staff interview, the facility failed to ensure 1 of 2 staff completed a one-time education course on . . . . . / . . . . . (/) within 30 days of employment. (Staff A).

The findings included:

Employee record review for Staff A, whose hire date is , did not contain a training certificate showing completion of state required education course on / within 30 days of hire. The Administrator was asked for evidence Staff A had completed the / training.

The administrator was not able to provide any documentation showing Staff A had completed the / education course.

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