STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910121	**02/19/2018**
NAME OF PROVIDER OR SUPPLIER **ROCKY CREEK VILLAGE**	STREET ADDRESS, CITY, STATE, ZIP CODE **8606 BOULDER COURT** **TAMPA, FL 33615**	

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

0000 - Initial Comments

Assisted Living Facility

An unannounced Biennial Survey was conducted on , in conjunction with an unannounced 2nd Revisit to 10/5/17 & 12/27/17 Complaint (CCR# 2017007859) and Complaint Investigation (CCR# 2017015459, 2018000842, & 2018001445).

Deficient practice was identified at the time of this visit.

License #5227

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

Based on record review and interview, the facility failed to ensure that newly hired staff (3 of 3 reviewed) submitted a statement from a health care provider, based on an examination conducted within the previous six months, that the person does not have any signs or symptoms of a communicable including .

Findings included:

Per record reviews and interviews conducted at the facility on , Staff A, B, & C provide direct care to residents. Staff A was hired as a Resident Aide/Medication Tech on ; Staff B was hired as a Certified Nursing Assistant (CNA) on , but no CNA certificate was found in Staff B's file; Staff C was hired as a Certified Nursing Assistant (CNA) on .

Per record reviews, there were no statements of freedom from communicable found in Staff A, B, & C employee files.

Per interview with the Assisted Living Facility Manager on at 3:30pm, the Manager acknowledged testing having been conducted, but no statements of freedom from communicable found in Staff A, B, & C employee files.

Class III

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

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SUMMARY STATEMENT OF DEFICIENCIES
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Based on record review and interview, the facility (with census of 116 residents) failed to ensure that all staff who provides direct care to residents receive a minimum of 1 hour in-service training in control, including universal precautions and facility sanitation procedures, before providing personal care to residents; receives a copy of the facility's resident elopement response policies and procedures, receives in-service training regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment, and demonstrates an understanding and competency in the implementation of the elopement response policies and procedures; a minimum of 1 hour in-service training within 30 days of employment that covers the facility's emergency procedures including chain-of-command and staff roles relating to emergency evacuation; and a minimum of 1 hour in-service training within 30 days of employment that covers reporting major and adverse incidents. The facility also failed to ensure that all facility staff who have not attended CORE training receive a minimum of 3 hours of in-service training within 30 days of employment that covers resident behavior and needs and providing assistance with the activities of daily living and a minimum of 1 hour in-service training within 30 days of employment that covers Resident Rights in an assisted living facility and Recognizing and Reporting resident , neglect, and .

Findings included:

Per record reviews and interviews conducted at the facility on , Staff A, B, & C provide direct care to residents; none of the staff are nurses or home health aides; Staff C is a Certified Nursing Assistant (CNA). Staff A was hired as a Resident Aide/Medication Tech on ; Staff B was hired as a Certified Nursing Assistant (CNA) on , but no CNA certificate was found in Staff B's file; Staff C was hired as a Certified Nursing Assistant (CNA) on . Per record reviews, there is no documentation of required staff in-service training as follows:

3 of 3 (Staff A, B, & C) records contained no documentation of Control training. Staff A's file contained a quiz on a video dated ; no training time indicated. Staff B's file contained a quiz on a video dated ; no training time indicated.

3 of 3 (Staff A, B & C) records contained no documentation of training in facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. Staff A's file contained no training certificate. Staff B's file contained fire drill instructions; there was no certificate of training in emergency procedures. Staff C's file contained 20 minutes of training as part of facility orientation & a "Hurricane & Evacuation" training dated ; no training time indicated.

3 of 3 (Staff A, B, & C) records contained no documentation of training in elopement response policies and procedures. Staff A's file contained Policy/procedure information; there was no certificate of training

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in Staff A, B, & C files.

3 of 3 (Staff A, B & C) records contained no documentation of training in reporting major & adverse incidents.

2 of 3 (Staff A & B) records contained no documentation of training in Activities of Daily Living & Behavioral needs.

2 of 3 (Staff A & B) records contained no documentation of training in Resident Rights in an Assisted Living Facility and Recognizing and Reporting resident , neglect, and . Staff A's file contained a Resident Prevention Program post-test dated ; no documentation of training. Staff B's file contained an orientation & resident rights quiz dated ; no documentation of training.

Per interview with the Assisted Living Facility Manager on at 5:30pm, the Manager acknowledged staff records not containing required training certificates.

Class III

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

Based on record review and interview, the facility failed to ensure that 2 of 3 direct care staff in a facility with 116 in-house residents completed a one-time education course on / (/) required within 30 days of hire.

Findings included:

Per record reviews and interviews conducted at the facility on , Staff A & B provide direct care to residents. Staff A was hired as a Resident Aide/Medication Tech on ; Staff B was hired as a Certified Nursing Assistant (CNA) on , but no CNA certificate was found in Staff B's file.

Per record reviews, there were no certicicates of training in / (/) found in Staff A & B employee files.

Per interview with the Assisted Living Facility Manager on at 3:30pm, the Manager acknowledged the lack of certificates in employee files.

Class III

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

Based on observation and record review, the facility failed to ensure that 1 of 6 staff reviewed who provide residents assistance with self-administration of medications has completed the required initial 4-hour training on providing assistance with self-administration of medications and safe medication practices in an Assisted Living Facility.

Findings included:

A review of employee files was conducted at the facility on beginning at 9:30am. Per record review, Staff A was hired as a Resident Aide/Med Tech on and is not a licensed nurse. Staff A's file contained a training certificate for completion of 4 hours of online Certified Nursing Assistant (CNA) continuing education training entitled "Helping Clients with Self-Administration of Medications" dated and a "Medication Documentation Quiz" dated . The online training does not meet training requirements pursuant to Florida Statute & Rules, including, but not limited to, demonstrations of proper techniques and opportunities for hands-on learning through practice exercises.

Per interview with the facility Licensed Practical Nurse (LPN) on at 11:20am and observation of resident Medication Observation Records (MORs), Staff A has provided residents assistance with self-administration of medication throughout the month of , 2018.

Class III

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

Based on record reviews and interviews, the facility failed to ensure that all direct care staff (3 of 3 reviewed) receive at least one hour of training in the facility's policies and procedures regarding ( ) within 30 days after employment.

Findings included:

Per record reviews and interviews conducted at the facility on , Staff A, B, & C provide direct care to residents. Staff A was hired as a Resident Aide/Medication Tech on ; Staff B was hired as a Certified Nursing Assistant (CNA) on , but no CNA certificate was found in Staff B's file; Staff C was hired as a Certified Nursing Assistant (CNA) on .

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Per record reviews, there were no training certificates found in Staff A, B, & C employee files in the facility's policies and procedures regarding ( ). Staff C's file contained an "Advance Directives Procedure" dated and a copy of the policy, but no evidence of training.

Per interview with the Assisted Living Facility Manager on at 3:30pm, the Manager acknowledged the lack of training certificates in employee files.

Class III

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

Based on record review and interview, the facility failed to maintain the employment status of all employees within the Background Screening Clearinghouse, including Initial employment status and any changes in status within 10 business days, for 4 of 11 employees providing direct care services for a current census of 116 in-house residents.

Findings included:

Per record review, Staff B, G, I, & J are all included on the Employee Listing provided by the Assisted Living Facility Manager on at 10:15am. Per employee record review conducted at the facility on , Staff B was hired as a Certified Nursing Assistant (CNA)/Med Tech on . Per review of the Employee Listing, Staff G was hired as a Certified Nursing Assistant (CNA) on ; Staff I was hired as a Certified Nursing Assistant (CNA) on ; Staff J was hired as a Certified Nursing Assistant (CNA)/Med Tech on . Per review of facility staff schedule for the week of through , Staff B, G, I, & J are all scheduled to work with residents. Per review of the facility's roster on the AHCA Background Screening website, Staff B, G, I, & J are not listed as employees of the facility.

Per review of the facility's roster on the AHCA Background Screening website, 15 (of 78) persons are listed as current employees of the facility whose background screenings have expired. Per interview and review with the Assisted Living Facility Manager, all 15 are former employees who should have end dates on the roster.

Unclassed