STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969178	**02/21/2018**
NAME OF PROVIDER OR SUPPLIER **CAIRN PARK 5**	STREET ADDRESS, CITY, STATE, ZIP CODE **2003 ACADEMY BLVD** **CAPE CORAL, FL 33990**	

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

0000 - Initial Comments

An unannounced limited nursing services survey was conducted on at Cairn Park 5, an assisted living facility (license #12986) in Cape Coral, Florida.

The following is description of the deficiency.

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

Based on observation, record review, and interview, the facility failed to notify the Agency for Health Care Administration (AHCA) of a new Administrator's name within 10 days after the previous Administrator resigned on .

The findings included:

During a limited nursing services survey on , the listed Administrator of the facility on FloridaHealthFinder.gov website was the previous Administrator, who resigned on .

During an interview on at 1:20 p.m., the current Administrator of the facility reported she was hired as the Administrator in , of 2017. She reported she took Core Training and did not pass the exam in of 2017 and was planning to retake the exam late of 2018.

During an interview on at 1:25 p.m., the owner of the facility reported he was not aware he had to report the new Administrator's name to AHCA within 10 days after the previous Administrator resigned. The owner of the facility reported he was not aware if an Administrator fails the Core exam they cannot be an Administrator at any facility until they pass the exam.

Class III