STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968987	**03/19/2018**
NAME OF PROVIDER OR SUPPLIER **ASTORIA ASSISTED LIVING FACILITY**	STREET ADDRESS, CITY, STATE, ZIP CODE **319 ELDRIDGE AVE** **ORANGE PARK, FL 32073**	

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

0000 - Initial Comments

An unannounced biennial relicensure survey was conducted in conjunction with a complaint survey (CCR# 2017015145) on at Astoria Assisted Living (Lic # 12817). Deficient practice was identified at the time of the visit related to the biennial relicensure survey.

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

Based on employee record review and staff interview the facility failed to ensure that non-core trained staff received the required training within 30 days of employment for Control, ADL and Behavior needs, Elopement response training, Emergency preparedness & Evacuation training, Incident reporting training, Resident rights training, Recognizing/Reporting , Neglect & , training, and Nutritional & Safe food handling, for 1 of 4 sampled employees (Employee B)

The findings include;

Record review showed Employee B was hired on as a non-licensed care associate. A review of her training file revealed she did not have the required in-service training for Control, ADL and Behavior Needs, Elopement response training, Emergency preparedness & Evacuation training, Incident reporting training, Resident rights training, Recognizing/Reporting , Neglect & , training, and Nutritional & Safe food handling within 30 days of employment, or at any time since the date of hire.

During an interview with the Administrator on at 3:30 pm, he confirmed Employee B did not have Control, ADL and Behavior Needs, Elopement Response training, Emergency Preparedness & Evacuation training, Incident reporting training, Resident rights training, Recognizing/ Reporting , Neglect & , training, and Nutritional & Safe food handling training. He added, "it must have gotten by me."

Class III

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

Based on record review and staff interview the facility failed to ensure that staff not core trained receive the required training within 30 days of employment for , ( )/ training for 1 of 4 sampled employees (Employee B).

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The findings include:

Record review showed Employee B was hired on as a non-licensed care associate. A review of her training file revealed she did not have the required / training.

During an interview with the Administrator on at 3:30 pm, he confirmed Employee B did not have the required / training. He added, "it must have gotten by me."

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(6) FAC

Based on employee record review and staff interview the facility failed to ensure the administrator or food service designee had 2 hours of continuing education annually.

The findings include:

A review of the employee record for the administrator revealed no proof of continuing education for food service annually. There were no other employees who were designated as the food service designee who had the training.

During an interview with the administrator on at 3:45 pm, he stated he did not have any training in the last year for food service designee training. He confirmed that he is the food service designee and no other employees have been designated or have received the training. He said he would be arranging to have his training as soon as possible and will be including his Kitchen Manger.

Class III

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

Based on document review and staff interview the facility failed to provide ( ) training in the facility policies and procedures regarding within 30 days of employment for 1 of 4 sampled employees (Employee B).

The Findings Include:

Record review showed Employee B was hired on as a non-licensed Care Associate without

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core training. A review of her training file revealed she did not have the required training.

During an interview with the Administrator on at 3:30 pm, he confirmed Employee B did not have the required training. He added, "it must have gotten by me."

Class III

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interviews the facility failed to provide a safe living environment ensuring that that the facility was free from hazardous conditions.

Findings include:

On at 10:30am, a tour was conducted of the facility. During the tour, 12 portable tanks were observed lying on the floor of Resident #5. In addition, during the tour it was observed that the ceiling tile was missing in the movie theater of the facility and several tiles were water stained.

On , a review of Resident #5's 1823 dated revealed he was diagnosed with .

On at 10:38am, an interview was conducted with Resident #5. Resident #5 confirmed that he moved into the facility on . Resident #5 confirmed that the he brought several tanks with him when he moved in and others have been delivered since moving into the facility. Resident # 5 was not sure which ones had in them. Resident #5 confirmed that is medically necessary in order for him to survive.

On , at 3:45pm, an interview was conducted with the Administrator. The Administrator stated that he was not aware that Resident #5 had so many tanks. The Administrator confirmed that there was a pipe leak in the ceiling of their movie theatre. The pipe was repaired but the ceiling tiles that held water stains were not replaced.

Photographic Evidence Obtained

Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on a review of employee files and interview with the Administrator, the facility failed to ensure the

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employee file was contained the required documentation for 1 of 3 sampled employees (Employee D).

The findings include:

A review of Employee D's personnel file found she was hired on as a Med Tech. There was missing documentation of the required initial 4 hour Medication Training prior to assisting with self-administration of medications.

An interview was conducted with the Administrator at 3:50 pm on . He confirmed the training documentation was missing from Employees D's file, but he stated he believed she had received the training. He confirmed he needed to contact Employee D to inform her she had to submit her certificate for her employee file.

Class III

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

Based on interview and record review, the facility failed to ensure that a comprehensive emergency management plan (CEMP) was approved by the local emergency management board within 30 days after becoming a licensed provider.

Findings include:

Record review showed that the facility obtained its license to operate as an assisted living facility on and received a letter from the Clay County Emergency Management Coordinator dated and again on , requesting additional information from the facility. There was no approved CEMP plan for the community available.

On at 1:52 pm, an interview was conducted with Administrator.. He was asked to provide a copy of their approved CEMP plan. He was unable to provide a copy and confirmed the facility received letters from the Clay County Emergency Management Coordinator dated and again on , requesting additional information from the facility.

Photographic evidence obtained

Class III

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Z815 - Background Screening; Prohibited Offenses - 408.809, 435.02(2), 435.06

Based on employee record review, staff interview and review of the Agency for Health Care Administration Care Provider Background Screening Clearinghouse, the facility failed to obtain a Level II background screening prior to providing personal care/personal services directly to the residents for 1 out of 4 sampled employees, (Employee B).

The findings include:

During a record review on [redacted], an employee record review was conducted on Employee B. Employee B's record did not contain evidence of a current "eligible" background screening. Record review of Level II background screening for Employee B on [redacted] revealed status as "Screening in Process."

A review of the Agency for Health Care Administration's Background Screening Clearinghouse website on [redacted] at 1:25 pm revealed that Employee B's current stats was still listed as "Screening in Process."

During an interview with the Administrator on [redacted] at 2:30 pm, he stated he was unaware that Employee B's background screening status was still in process. After reviewing the Agency for Health Care Administration's Background Screening Clearinghouse website with surveyor, he confirmed that Employee B was not eligible at this time.

Photographic evidence obtained

Unclassified