

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/13/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910622	(X3) DATE SURVEY COMPLETED 03/12/2018
NAME OF PROVIDER OR SUPPLIER HERITAGE HOUSE RETIREMENT HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1810 S. BELCHER ROAD CLEARWATER, FL 34624	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility On 03/12/2018, a change of ownership survey in conjunction with complaint survey (CCR #2018002739) was conducted at Heritage House Retirement Home (Lic. #5401). Deficient practice was identified during the change of ownership survey. 0078 - Staffing Standards - Staff - 58A-5.019(2) FAC Based on record review and interview, two of three staff sampled (B; D) who had been employed at least 30 days had not obtained an assessment from a healthcare provider (physician; ARNP; physician's assistant) based on an examination no more than 6 months old attesting their freedom from other communicable _____ in addition to _____ (). Findings include: A personnel review during the _____ inspection found that the files for Staff B and D, hired _____ and _____, respectively, indicated that although each had obtained a current _____ evaluation, neither had an assessment from a healthcare provider verifying their freedom from signs and symptoms of other communicable _____. Interview with the administrator at 1:30pm on _____ provided no clarification for this oversight other than "she thought the paperwork she had met the requirement." Class III 0081 - Training - Staff In-Service - 58A-5.0191(2) FAC Based on record review and interview, one of three staff sampled who had been employed at least 30 days (B) had not received all required training. Findings include: A personnel file review during the _____ survey revealed that Staff B, hired _____, had no		

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documented evidence of receiving the training in reporting major and adverse incidents. Interview with the administrator at 1:40pm on _____ verified that this document was unavailable for inspection. Class III 0083 - Training - First Aid and _____ - 58A-5.0191(4) FAC Based on record review and interview, one of four staff sampled (E) who worked in the facility alone with residents did not have current First Aid nor _____ () certification. Findings include: A personnel record review during the _____ survey found that Staff E, hired _____, had no First Aid card available for review, and this individual's _____ card had expired _____. According to review of the facility schedule, this employee was frequently on duty during the evenings with no other staff person. Interview with the administrator on _____ provided no clarification for this discrepancy. Class III		