STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964731	**04/17/2018**
NAME OF PROVIDER OR SUPPLIER **HARBOR POINT ALF, INC.**	STREET ADDRESS, CITY, STATE, ZIP CODE **1045 HARBOR LAKE DRIVE** **SAFETY HARBOR, FL 34695**	

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

0000 - Initial Comments

Assisted Living Facility

On , , 2018, a biennial relicensure survey was conducted at Harbor Point Assisted Living Facility (ALF) (Lic. #9270). Deficient practice was identified during the survey.

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

Based on record review and interview, one of three staff sampled (A) who had been employed at least 30 days had not obtained annual documentation of their freedom from ( ).

Findings include:

A personnel file review during the survey found that the latest assessment for Staff A was from . Further review of the record revealed no subsequent evaluation for having been obtained. Interview with the designee at 1pm on provided no clarification for this discrepancy.

Class III

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

Based on record review and interview, two of three staff sampled (B; C) who had been employed at least 30 days had not received the required training in / (/ .

Findings include:

A personnel file review during the survey indicated that Staff B and C, both hired 2003 respectively, had no documented evidence that either individual had received the training in and . Interview with the designee at 1:10pm on provided no explanation for this oversight.

Class III

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

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

Based on observation, record review and interview, the facility failed to ensure that one of three staff sampled (B) who assisted residents as part of their duties had received the required training prior to taking on this responsibility.

Findings include:

At approximately 12:25pm on , Staff B (administrative designee) was observed providing medication assistance to one of the residents. Although a review of this individual's personnel file found several certificates of medication-related training, these all were for 2 hours, the most recent being from . . . . . Further review of the record found no documented evidence that Staff A had taken the 4 hour medication assistance foundation course. Interview with Staff B at 1:35pm on indicated that "he thought he probably had this certificate filed at his adult family care home."

Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on record review and interview, the facility had no documentation of tracking menu substitutions for at least the last six months.

Findings include:

A review of the facility's current substitution log during the survey found at least 4 different entries ranging from . . . . to where the individual documenting the menu change refers to the wrong meal and wrong menu cycle when entering the food items that were actually prepared/served for that given day/given meal, according to the facility's approved menu.
Interview with the administrative designee at 11am on provided no explanation for this discrepancy.

Class III

0167 - Resident Contracts - 58A-5.025 FAC

Based on record review and interview, the contracts for two of two residents sampled (#1; 2) did not contain the current rate they were paying, nor was there a provision explaining the facility's policies and procedures related to a properly executed DH Form 1896, ( ), or a description of the facility's policies/procedures regarding Advance Directives.

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

Findings include:

Resident record review during the survey revealed that the contract for Resident #1 (admitted to the facility) had no stipulated rate entered. In addition, there was no documented evidence that the facility's policies and procedures regarding advance directives and (including the DH Form 1896) had been discussed/disseminated to the resident/his representative. Although review of Resident #2's record found a contract that had been amended as of indicating a monthly rate of $704, it was unclear if this was the current rate that the resident was paying. In addition, no documentation could be located verifying the facility's policies and procedures pertaining to advance directives and had been provided to the resident. Interview with the designee at 2pm on confirmed that these documents were not available for review and that he was not certain they had been provided to these residents.

Class III