STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964511	R **04/11/2018**
NAME OF PROVIDER OR SUPPLIER **FRESH WATER AT HUDSON**	STREET ADDRESS, CITY, STATE, ZIP CODE **14108 OLD DIXIE HIGHWAY** **HUDSON, FL 34667**	

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

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS

Based on record review and interview, the facility failed to ensure that a signed Attestation of Compliance accompanying the Level 2 Background Screening was maintained on file for one (Staff C) of four employee records sampled.

Findings included:

A review of employee records conducted on . . . revealed that Staff C's record did not have a signed Attestation of Compliance accompanying the Level 2 background screening. Staff C had a background screening eligibility date of . . and date of hire of . . . .

The Administrator was interviewed at 3:10 PM on . . . and acknowledged that there was no signed copy of the Attestation of Compliance in Staff C's record.

Unclassified

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SUMMARY STATEMENT OF DEFICIENCIES
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0000 - Initial Comments

Assisted Living Facility

A follow-up visit to . . . . . Biennial Survey was conducted at Fresh Water at Hudson on . . . . Fresh Water at Hudson had deficiencies at the time of the visit.

(License #9047)

0026 - Resident Care - Social & Leisure Activities - 58A-5.0182(2) FAC

Based on observation and interview, the facility failed to provide an ongoing activities program, available at least six days a week for a total of not less than twelve hours per week, that encouraged residents in the facility, in order to meet their needs, interests, and abilities.

Findings included:

A survey was conducted at the facility on from 9:15 AM to 3:40 PM. The activities calendar for the day indicated an activity at 8 AM- 9 PM called "Ball". The activity posted for 3 PM- 4 PM stated "Looking Picture". There were no activities observed during the course of the survey.

An interview was conducted with Staff A at 1:41 PM on concerning the 8 AM activity and they stated that it was not conducted. Interviews were also conducted with several residents on and they stated that the facility offered activities once or twice a week at most.

The Administrator was interviewed at 2:46 PM on . They acknowledged that the facility did not meet the requirement for an ongoing activities program and stated that they will work on it.

Class III

0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC

Based on record review and interview, the facility failed to conduct and document elopement drills pursuant to Sections 429.41(1)(a) and 429.41(1)(l) Florida Statutes.

Findings included:

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

A request was made to Staff A on to provide the facility's elopement drill log. An interview was conducted with Staff A at 10:23 AM on and they stated that they could not locate the elopement drill log.

An interview was conducted with the Administrator at 2:51 PM on and they stated that the required elopement drills were not being conducted.

Class III

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

Based on record review and interview, the facility failed to provide a minimum of one hour in-service training in the subject of emergency procedures (Emergency Procedures Training), within 30 days of employment, for one (Staff B) of four employee records sampled.

Findings included:

A review of employee records conducted on showed that Staff B had a date of hire of . A review of Staff B's record showed no Emergency Procedures Training.

The Administrator was interviewed at 3:00 PM on concerning Emergency Procedures Training for Staff B and they acknowledged that it hadn't been conducted and stated that they will get it.

Class III

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

Based on record review and interview, the facility failed to provide proof that employees received training, within 30 days of employment, in the subject of / , (/ Training) for one (Staff B) of four employees sampled.

Findings included:

A review of employee records conducted on showed that Staff B had a date of hire of . A review of Staff B's record showed no proof of / Training.

The Administrator was interviewed at 3:00 PM on and acknowledged that Staff B's record had no proof of / Training.

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
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SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on record review and interview, the facility failed to maintain an up-to-date Admission-Discharge log for one (Resident #7) of four sampled discharged residents.

Findings included:

A review of the Admission-Discharge Log conducted on showed that Resident #7 was listed as a current resident.

An interview was conducted with the Administrator on at 3:05 PM concerning Resident #7's residency in the facility. The Administrator stated that Resident #7 was discharged, probably in 2017. The Administrator acknowledged that the discharge information was not listed in the Admission-Discharge Log.

Class III

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

Based on record review and interview, the facility failed to ensure that employee records contained all required documentation for three (Administrator, Staff A, and Staff C) of four records reviewed.

Findings included:

A review of employee records conducted on showed that the Administrator's record did not contain a job description or proof of 2 hours of annual continuing education as the food service designee (the last training on record was dated). A review of Staff A's record did not show and application with references. A review of Staff C's record did not show an Attestation of Compliance accompanying the Level II background screening.

An interview was conducted with the Administrator on at 3:10 PM and they acknowledged the missing documentation from the employee records of the Administrator, Staff A, and Staff C.

Class III