STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964851	**04/23/2018**
NAME OF PROVIDER OR SUPPLIER **SUNSHINE ASSISTED LIVING, INC.**	STREET ADDRESS, CITY, STATE, ZIP CODE **6513 NW 55TH STREET** **CORAL SPRINGS, FL 33067**	

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

0000 - Initial Comments

An unnanounced abbreivated relicensure survey was conducted on . . . . . at Sunshine Assisted Living, License # 9300. The facility had deficiencies at the time of the survey.

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

Based on record review and interview, it was determined the facility failed to ensure that all staff members had completed the required in-service trainings within 30 days of hire, for 1 out of 3 sampled staff records reviewed (Staff C).

The findings include:

Record review of Staff C's personnel record revealed her date of hire was . Further review revealed Staff C's file lacked documentation indicating the employee had completed the Elopement Response training.

On at 12:10 PM, the Administrator was advised about the Elopement Response training certificate not in the staff file. The Administrator reviewed Staff C file and stated she remember giving her the training but cannot find it at this time. The Administrator confirmed the findings and provided no additional documentation during the time of the survey.

Class III

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

Based on record review and an interview the facility failed to ensure that 1 out of 3 sampled unlicensed staff members (Staff A and B) who provided assistance with self-administered medications had successfully completed a minimum of 2 hours of annual continuing education in providing assistance with self-administered medications and safe medication practices in an ALF and had obtained at least 4 hours (initial training) of Medication with Assistance Training by a Registered Nurse or License Pharmacist, for 1 out of 3 unlicensed sampled staff members that assist with meds.

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The findings included:

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

a) The personnel file for Staff A was reviewed for documentation of a minimum of 2 hours of continuing education training annually on providing assistance with self-administered medications and safe medication practices in an ALF. There was no documentation of this training for this unlicensed staff member who provided assistance with self-administration of medication to residents. The 4 hour initial medication training certificate located in the file notes a completion date of .

b) The personnel file for Staff B was reviewed for documentation of a minimum of the 4 hours initial training on providing assistance with self - administered medications in an ALF. The certificate in the file (dated) presented as a 4 hour training giving assistance with self - administered medications in an ALF given by an LPN.

During an interview with the Administrator on at 11:27 AM, she acknowledged Staff B training certificate credentials signed as training given by an LPN from the school of training. The Administrator stated she would call the school to clarify who provided the training.

Class III

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

Based on record review and interview, the facility failed to have and provide an approved emergency management preparedness plan.

The findings included:

Record review of the facility records revealed there was no evidence of the CEMP (comprehensive emergency management plan) that was approved by the local emergency management agency. During documentation review, there was no evidence of an approved CEMP. During an interview with the Administrator on , the Administrator stated she had not submitted the new plan yet because the new emergency management plan request for an employee plan and she was not sure about what the employee plan should include. She further stated she contacted her consultant and the consultant stated he was unsure about what the employee plan should include. The administrator confirmed that she does not have a current approved CEMP.

Class III