STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965867	**05/15/2018**
NAME OF PROVIDER OR SUPPLIER **CUNNINGHAM ELDERLY, LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2909 COURTLAND BLVD** **DELTONA, FL 32738**	

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

0000 - Initial Comments

An unannounced biennial licensure survey was conducted at Cunningham Elderly, LLC (License #10202) on , , 2018. Deficiencies were identified.

0008 - Admissions - Health Assessment - 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on resident record review and staff interview, the facility failed to ensure accuracy of Admission Health Assessments for 1 of 4 resident records reviewed. (Resident #5)

The findings include:

Record review of the facility admission and discharge log with the Administrator on at 8:25 AM, revealed Resident #5's name was missing. The Administrator confirmed the residents name was missing. A telephone interview with Resident #5's daughter on at 2:54 PM revealed the resident had resided at the facility for about a year and a half.

Record review for Resident #5 revealed an AHCA 1823 Health Assessment signed by a physician based on a date of examination . Further review of page 4 of the AHCA 1823 revealed Question B, "Does the individual need help with taking his or her medications?" was not answered along with they type of assistance should he need help.

The Administrator was notified of the missing information during interview on at 1:25 PM. She stated she did not have another AHCA 1823 to provide.

Class III

0054 - Medication - Records - 58A-5.0185(5) FAC

Based on record review and staff interview, the facility failed to maintain accurate medication observation records for 1 of 4 sampled residents. (Resident #5)

The findings include:

Record review of the , 2018 Medication Observation Record (MOR) for Resident #4 found an order for , 25 milligrams, with directions to give one tablet by mouth. It was listed twice on

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the MOR.

The Administrator was shown the MOR on at 1:25 PM. She confirmed the findings and confirmed it needed to be fixed.

Photograph evidence obtained

Class III

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

Based on employee record review and staff interview, the failed to ensure within 30 days of employment 2 of 3 employees (Employee A and the Administrator) provided a written statement from a health care provider documenting that the individual did not have any signs or symptoms of communicable including evidence of a negative ( ) examination. The facility also failed to ensure evidence of a negative examination was documented on an annual basis for 2 of 3 employees. (Employee A and the Administrator)

The findings include:

Record review for Employee A (hired) found no evidence of a communicable statement and the most recent negative test found was out dated.

Record review for the Administrator found no evidence of a communicable statement or a negative test.

The findings were confirmed during an interview with the Administrator. She confirmed on at 12:00 pm the information was not in the employee files.

Class III

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

Based on employee record review and staff interview, the facility failed to ensure 1 of 2 employees (Employee A) received training in providing assistance with activities of daily living; resident rights; emergency procedures including chain of command and staff roles relating to emergency evacuations; resident elopement response policies and procedures and safe food handling practices within 30 days of employment.

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The findings include:

Record review for Employee A (hired) revealed no evidence training was received in providing assistance with activities of daily living, resident rights; emergency procedures including chain of command and staff roles relating to emergency evacuations; resident elopement response policies and procedures; and safe food handling practices within 30 days of employment.

The findings were confirmed during an interview with the Administrator on at 11:45 AM. She was asked for the missing training. She looked in the employee file and could not locate it.

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 food service designee for the facility obtained annually a minimum of 2 hours continuing education in food service and nutrition. (Administrator).

The findings include:

Record review of the employee file for the Administrator found no evidence of food service training. During an interview with the Administrator on at 12:00 pm, she stated she is the food service designee for the facility. She was asked if she had any food service training in the past year. She stated she was not aware she needed to have training on an annual basis and had not had any training in over two years.

Class III

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

Based on employee record review and staff interview, the facility failed to ensure 1 of 2 employees received a minimum of 1 hour of training in the facility's policy and procedures regarding Do No Orders, within 30 days of employment. (Employee A)

The findings include:

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Record review for Employee A (hired) revealed no evidence the employee received a minimum of 1 hour of training in the facility's policy and procedures regarding .

The findings were confirmed during an interview with the Administrator on at 11:45 AM. The Administrator was asked for the missing training. She looked in the employee file and could not locate it.

Class III

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

Based on record review and staff interview, the facility failed to ensure the menus for the 6 residents that reside at the facility were reviewed annually by a licensed or registered dietitian (RD).

The findings include:

Observation in the facility on at 12:110 PM found the facility menus were on the refrigerator. Record review of the menus found they were signed by the RD on . The findings were confirmed by the Administrator at the time of observation. She stated it was a very bad year for her and she did not get new menus.

Photographic Evidence Obtained.

Class III

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

Based record review and an interview with the Administrator, the facility failed to maintain up to date admission/discharge logs for 1 of 6 residents living at the facility (Resident #5), and failed to maintain documentation of elopement drills for 2 of 2 years renewed.

The findings include:

Record review of the facility admission and discharge log with the Administrator on at 8:25 AM, revealed Resident #5's name was missing. The Administrator confirmed the residents name was missing. She reviewed the older pages of the log and could not find the residents name. A telephone interview with Resident #5's daughter on at 2:54 PM revealed the resident had resided at the facility for about a year and a half.

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The Administrator was asked on at 12:00 pm for evidence of the elopement drills since the last biennial survey. She stated she did not have the paperwork at the facility. She stated she gave them to the individual that was working on her emergency management plan.

Photographic Evidence Obtained

Class III

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

Based on employee record review and staff interview, the facility failed to maintain a personnel file that contained at a minimum, a copy of the employment application for 1 of 3 employees (Employee B) failed to maintain documentation of compliance with level II background screening for 1 of 3 employees (Employee A) and failed to maintain employee schedules to ensure care for the 6 residents that reside at the facility.

The findings include:

Record review of the employee file for Employee B found no evidence of an employment application. During an interview with the Administrator on at 11:50 AM, she stated Employee B started work at the facility on . She confirmed Employee B's file did not contain an employment application.

Record review of the employee file for Employee A (hired) found no evidence of a Level II Background screening. During an interview with the Administrator on at 11:45 AM, she confirmed it was missing. She stated she did not know how to print it out.

The employee schedule was requested from the Administrator on at 1:00 PM. Record review found the schedule was for , . Record review of the schedule found it showed the Administrator working 12 hours a day and Employee A working 12 hours a day. The schedule did not include Employee A who was hired on . The Administrator was asked for the , schedule and she stated she did not have one. She was asked for the schedule prior to , and she once again stated she did not have them.

Class III

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0180 - Emergency Management - 58A-5.026(1) FAC

Based on staff interview and record review, the facility failed to prepare a written comprehensive emergency management plan to ensure the safety of the six residents that reside at the facility.

The findings include:

During an interview with the Administrator on at 11:45 AM, she was asked for the facility's comprehensive emergency management plan. She stated she gave it to someone to do for her. She was asked for evidence she had ever completed a plan in the past and submitted one for approval. She stated she did not have anything to provide.

Class III

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

Based on employee record review and staff interview, the facility failed to ensure 1 of 3 employees (Employee B) received a Level II Background screening prior to working at the facility.

The findings include:

Record review of the employee file for Employee B found no evidence of a Level II background screening. During an interview with the Administrator on at 11:50 AM, she stated Employee B started work at the facility on . She confirmed she did not have a Level II Background screening for Employee B. She stated she thought Employee B was screened by her last employer.

The findings were confirmed during an interview with Employee B on at 12:47 PM. She stated she started working at the facility on . Prior to working at the facility, she worked three years as a private caregiver.

Unclassified