STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969097	**09/26/2018**
NAME OF PROVIDER OR SUPPLIER **COMFORT CARE HOME ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **2402 SW SANTANA AVE** **PORT SAINT LUCIE, FL 34953**	

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

0000 - Initial Comments

An unannounced relicensure survey was conducted on at Comfort Care Home ALF, License # 12927. The facility had deficiencies at the time of the visit.

0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28(1-2) FS

Based on observation and interview it was determined the facility failed to post the telephone numbers for lodging complaints against a facility or facility staff in full view in a common area accessible to all residents. The telephone numbers the facility failed to post are: , Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida Hotline, 1(800)96- or 1(800)962-2873. The telephone numbers must be posted in close proximity to a telephone accessible by residents and the text must be a minimum of 14-point font.

Based on observation and interview it was determined the facility failed to provide residents with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication, pursuant to section 429.28(1)(d), F.S.

The findings include:

1) During observation of the facility conducted with the Administrator, on beginning at approximately 8:40 AM, she was asked where the mandatory posting of telephone numbers for residents to lodge complaints against a facility or facility staff was located. She pointed to the Ombudsman's information. She was asked about the telephone numbers for: , Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida Hotline, 1(800)96- or 1(800)962-2873. The Administrator stated she was not aware these numbers needed to be posted.

2) During observation of the facility conducted with the Administrator, on beginning at approximately 9:20 AM, she was asked how residents are provided with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication. She stated if the resident asks to use the telephone, a staff member will hand them the portable phone. The portable phone is kept in the kitchen which is gated to prevent access to the kitchen area. The Administrator was asked how this meets the regulatory requirement of a resident's right to unrestricted and convenient access to a telephone. She acknowledged that it currently does not.

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Class III

0079 - Staffing Standards - Levels - 58A-5.019(3) FAC

Based on interview and record review it was determined the facility failed to ensure a staff member who has completed a course in First Aid and holds a currently valid card documenting completion of such course must be in the facility at all times for 2 of 3 sampled staff (Staff A and Staff B).

Based on interview and record review it was determined the facility failed to maintain a written work schedule that reflects its 24-hour staffing pattern for a given time period.

The findings include:

1) During interview and staff record review conducted with the Administrator, on beginning at approximately 10:40 AM, she was provided the opportunity to locate documentation (a currently valid card) of completion of First Aid for the following staff that works 24-hour shifts:

a. Staff A: date of hire noted as
b. Staff B: date of hire noted as

The Administrator acknowledged Staff A and Staff B did not have the required documentation on file at the time of this review.

2) During interview and record review conducted with the Administrator, on beginning at approximately 8:35 AM, she was asked for a copy of the staff work schedule that reflects the 24-hour staffing pattern. She provided a two week schedule dated - . It only noted if the following staff members were on, off, or on call:

a. Staff A: date of hire noted as
b. Staff B: date of hire noted as
c. Staff C: date of hire noted as

The Administrator acknowledged this schedule does not reflect the number of hours worked/scheduled for each staff member.

Class III

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

0081 - Training - Staff In-Service - 58A-5.0191(2-3) FAC

Based on interview and record review it was determined the facility failed to ensure each staff member (that provides direct care to residents) must receive training in the following subjects within 30 days of hire for 2 of 3 sampled staff (Staff A and Staff B).

The findings include:

During interview and staff record review conducted with the Administrator, on beginning at approximately 10:40 AM, she was provided the opportunity to locate the following inservices for the noted staff members:

a. Staff A (date of hire noted as): Reporting Adverse Incidents; Facility's Emergency Procedures; Resident Rights; Recognizing and Reporting , Neglect, and ; and Elopement Response policies and procedures

b. Staff B (date of hire noted as): Facility's Emergency Procedures; Safe Food Handling Practices; and Elopement Response policies and procedures.

The Administrator acknowledged documentation of the above noted training were not on file at the time of this review.

Class III

0082 - Training - / - 58A-5.0191(4) FAC

Based on interview and record review it was determined the facility failed to ensure all facility employees completed a one-time education course on and within 30 days of hire for 1 of 3 sampled staff (Staff A).

The findings include:

During interview and staff record review conducted with the Administrator, on beginning at approximately 10:40 AM, she was provided the opportunity to locate documentation of completion of a course on and within 30 days of hire for the following staff member:

a. Staff A: date of hire noted as

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The Administrator acknowledged Staff A did not have the required documentation on file at the time of this review.

Class III

0083 - Training - First Aid and - 58A-5.0191(5) FAC

Based on interview and record review it was determined the facility failed to ensure a staff member who has completed a course in First Aid and holds a currently valid card documenting completion of such course must be in the facility at all times for 2 of 3 sampled staff (Staff A and Staff B).

The findings include:

During interview and staff record review conducted with the Administrator, on beginning at approximately 10:40 AM, she was provided the opportunity to locate documentation (a currently valid card) of completion of First Aid for the following staff that works 24-hour shifts:

a. Staff A: date of hire noted as
b. Staff B: date of hire noted as

The Administrator acknowledged Staff A and Staff B did not have the required documentation on file at the time of this review.

Class III

0086 - Training - ADRD - 58A-5.0191(10) FAC

Based on interview and record review it was determined the facility failed to ensure facility staff who provide direct care to residents with ADRD must obtain an additional 4 hours of training, entitled " and Related Level II Training," within 9 months of employment for 2 of 3 sampled staff (Staff A and Staff B).

The findings include:

During interview and staff record review conducted with the Administrator, on beginning at approximately 10:40 AM, she was provided the opportunity to locate ADRD Level II Training for the following staff:

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1) Staff A: date of hire noted as
2) Staff B: date of hire noted as

The Administrator was not able to locate documentation of this required training (to be provided within 9 months of hire). The Administrator acknowledge the facility is locked at all times and staff kept control of the key. This surveyor observed the facility to be locked during this entire survey.

Class III

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

Based on interview and record review it was determined the facility failed to ensure each staff member received at least one hour of training in the facility's policy and procedures regarding ( ) within 30 days after employment for 2 of 3 sampled staff (Staff A and Staff B).

The findings include:

During interview and staff record review conducted with the Administrator, on beginning at approximately 10:40 AM, she was provided the opportunity to locate documentation of completion of at least one hour of training in the facility's policy and procedures regarding DRNOs for the following staff:

a. Staff A: date of hire noted as
b. Staff B: date of hire noted as

The Administrator acknowledged this documentation was not on file at the time of this review.

Class III

0162 - Records - Resident - 58A-5.024(3) FAC

Based on interview and record review it was determined the facility failed to maintain documentation of the appointment of a health care surrogate, health care proxy, guardian, or the existence of a power of attorney when a family member signed the resident's contract/residency agreement with the facility for 1 of 2 sampled residents (Resident #2).

The findings include:

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SUMMARY STATEMENT OF DEFICIENCIES
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During interview and review of Resident #2's record conducted with the Administrator, on beginning at approximately 11:45 AM, she was asked for a copy of health care surrogate; health care proxy; guardianship; or the existence of power of attorney for this resident as the daughter had signed the facility contract/residency agreement. She stated she did not have this documentation because the resident refused to sign it prior to admission to the facility. She was asked if this resident had been declared . She said she did not think so.

Class III

Z813 - Results of Screening & Notification In File - 59A-35.090(3)(c), FAC

Based on interview and record review it was determined the facility failed to maintain the signed Attestation referenced in subsection 59A-35.090(2), F.A.C. in each staff file for 3 of 3 sampled staff (Staff A, Staff B, and Staff C).

The findings include:

During interview and staff record review conducted with the Administrator, on beginning at approximately 10:40 AM, she was provided the opportunity to locate the Attestation form for the following staff:

a. Staff A: date of hire noted as
b. Staff B: date of hire noted as
c. Staff C: date of hire noted as

The Administrator stated she was not aware this documentation should be maintained in each staff member's file and that she could not locate this documentation at the time of this review.

Unclassified