STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968630	11/13/2018
NAME OF PROVIDER OR SUPPLIER **BLOOM AT ST PETERSBURG**	STREET ADDRESS, CITY, STATE, ZIP CODE **6775 40TH AVE NORTH** **SAINT PETERSBURG, FL 33709**	

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

0000 - Initial Comments

Assisted Living Facility

On , a complaint survey (CCR#2018014589) was conducted at Bloom at St. Petersburg. At the time of the survey the facility had deficiencies.

(License #12498)

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

Based on record reviews and interviews, the facility failed to ensure that 3 (Wellness Director, Staff A and Staff B) of 3 direct care staff selected for record review completed the required training within 30 days of employment.

Findings included:

A record review conducted on 11/13/18, revealed that the Wellness Director had a hired date of and no documentation of training in Resident Rights (1 hour) and Incident Reporting (1 hour).

A record review conducted on 11/13/18 revealed that Staff A (Resisdent Assistant) had a hire date of and no documentation of training in Resident Rights (1 hour), Incident Reporting (1 hour) and Activities of Daily Living and Behavioral Needs (3 hours).

A record review conducted on 11/13/18, revealed that Staff B (Resident Assistant) had a hire date of and had documentation of training in Resident Rights (1 hour) on , Incident Reporting (1 hour) on and Activities of Daily Living and Behavioral Needs (3 hours) on , howver the training was not completed within 30 days of employment.

During an interview conducted on at 12:33pm, the Administrator confirmed the training was not completed within 30 days of employment. The Administrator stated "We don't have that training for those staff within the 30 days of hire."

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SUMMARY STATEMENT OF DEFICIENCIES
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Class III