STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968401	**11/20/2018**
NAME OF PROVIDER OR SUPPLIER **S&B KINGDOM CARE, LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **53 RIVIERE LANE** **PALM COAST, FL 32164**	

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

0000 - Initial Comments

A biennial relicensure survey was conducted at S&B Kingdom Care, LLC on . . . . Deficient practice was identified during the survey.

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

Based on record review and interview the facility failed to ensure that one (1) of three (3) employee's reviewed had a current first aid card (Employee C).

The findings include:

A record review was conducted for Employee C, Med Tech/Caregiver and revealed a hire date of . . A further review revealed that her First Aid card had expired on , .

On at 11:36 AM Interview was conducted with the Administrator in reference to Employee C, Med Tech/Caregiver having an expired First Aid card, and she confirmed it had expired, and stated, "Yes, it just expired, that is why she did not renew it with us in , . I will call her and make sure she does not have a new card".

On . . at 11:57 AM Administrator confirmed that Employee C did not have a new First Aid card, and she would have her take a class as soon as possible.

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(7) FAC

Based on record reviews and interview the facility failed to obtain annual food service training and/or have any employees in the facility with a valid food service certificate for three (3) of three (3) employee's reviewed (Employee A, B, and C).

The findings include:

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968401	**11/20/2018**
NAME OF PROVIDER OR SUPPLIER **S&B KINGDOM CARE, LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **53 RIVIERE LANE** **PALM COAST, FL 32164**	

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

A record review was conducted for Employee A, Administrator, and it revealed that she was hired in . A further review revealed that her food service certificate had expired on . Photographic evidence was obtained.

A record review was conducted for Employee B, Med Tech/Caregiver, and it revealed that she was hired on , . A further record review revealed that her food service certificate had expired on . Photographic evidence was obtained.

A record review was conducted for Employee C, Med Tech/Caregiver and revealed a hire date of , . A further record review revealed that her food service certificate had expired on , , . Photographic evidence was obtained.

On at 10:47 AM Interview was conducted with the Administrator and she confirmed that her food handling certificate, and the certificates for Employee's B and C had expired. She stated that they all handle food, depending on the schedule. She stated that she will get them done as soon as possible.

Class III