STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969150	**09/26/2018**
NAME OF PROVIDER OR SUPPLIER **PRESTIGE PLACE ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **256 BARBAROSSA RD** **PALM BAY, FL 32907**	

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

0000 - Initial Comments

Complaint Investigation #2018009556 was conducted on . . , ... , . . . Prestige Place Assisted Living Facility, license #12968, had deficiencies at the time of the visit.

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

Based on record reviews and interviews, the facility failed to ensure an 1823 health assessment form was complete and accurate for 1 of 4 sampled residents (#2).

Findings:

Resident #2's record revealed a facility admission date of . . . . . The only 1823 health assessment form that was in the record was not dated. Page 1 of the form indicated that he required assistance with his medications while page 4 indicated that he was able to administer his medications without assistance.

On at 11:39 a.m., the administrator confirmed the findings and was unable to provide additional documentation. She said the facility stored resident #2's medications and he received assistance from the facility staff. She said although the form was not dated, it was completed prior to his admission to the facility.

Class III

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on record reviews and interviews, the facility failed to ensure 1 of 4 sampled residents (#2) who experienced a significant change had a . . . -to- . . . . medical examination by a health care provider that was recorded on a health assessment form 1823.

Findings:

Resident #2's record revealed a facility admission date of . The only 1823 health assessment form that was in the record was not dated. Resident #2 was admitted to hospice services on . . . . . .

On . . . . . at 11:39 a.m., the administrator confirmed the findings and was unable to provide additional documentation. She said a new 1823 was not completed when resident #2 was admitted to hospice

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services, as was required. She also said that although the form was not dated, it was completed prior to his admission to the facility.

Class III

0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC

Based on observation, record review and interview, the facility failed to make a daily effort to determine that a resident (#1) who was at risk for elopement had Identification (ID) on their person that included their name and the facility's name, address, and telephone number.

Findings:

Resident #1's record revealed a facility admission date of . His admission 1823 health assessment form, dated , indicated that he was an elopement risk. His diagnoses included , Wernickie , , , severe behavioral , and he had occasional aggression. He ambulated independently.

Observations made of resident #1 on at 11 a.m. revealed he did not have ID on his person that included his name, the facility's name, address and telephone number, as was required.

On at 11:30 a.m., the administrator confirmed the findings and said she thought the 1823 was answered "No" as to whether resident #2 was an elopement risk.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure that 1 of 2 sampled staff (A) received the required in-service trainings.

Findings:

Caregiver A's personnel record revealed a hire date of . The record did not contain documentation to indicate she received training within 30 days of employment that covered recognizing and reporting resident , neglect and , and the facility's resident elopement response policies and procedures.

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On at 12:15 p.m., the administrator confirmed the findings and was unable to provide additional documentation.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure 1 of 2 sampled staff (A) completed a one-time education course on ( ) and ( ) within 30 days of employment.

Findings:

Caregiver A's personnel record revealed a hire date of . The record did not contain documentation to indicate she completed a one-time education course on and , as required.

On at 12:17 p.m., the administrator confirmed the finding and was unable to provide additional documentation.

Class III

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

Based on observations and interviews, the facility failed to ensure a staff member who held a current valid ( ) and First Aid card was in the facility at all times.

Findings:

Observations made on at 9:15 a.m. revealed a man who identified himself as the administrator's husband and a woman who said she was a visitor who cleaned the facility (housekeeper) were both present and had unrestricted access to all of the resident's rooms. Other than those two and the residents, there were no other individuals present in the facility. When questioned as to who was in charge of the residents, the administrator's husband did not answer the question but rather said the administrator just went to the store and would be returning soon.

On at 9:30 a.m., the housekeeper said she arrived to the facility on the night before, she was leaving this morning and she did not work at the facility. A request was made of the housekeeper to provide her date of birth and social security number so a review of the Agency's background screening

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website could be checked for an eligible screening however, she declined to provide her social security number. A review of the background screening website, by using only her date of birth and her identified name, revealed no matches.

On at 9:32 a.m., the administrator arrived to the facility at which time, both her husband and the housekeeper left the facility.

On at 9:39 a.m., the administrator said the housekeeper was a friend who helped with sweeping the facility. She said the housekeeper did not have an eligible background screening and, besides the housekeeper's name. She was unable to provide any additional identifiers such as date of birth and social security number. She said caregiver A had been at the facility that morning at 7 a.m. but she had to leave for an emergency so the administrator's husband was left in charge of the residents that morning.

On at 9:44 a.m., the administrator said neither her husband nor the housekeeper held a current valid and first aid card and her husband did not have an eligible background screening. A review of the background screening website, using the identifying information provided by the administrator revealed her husband did not have any background screening results.

Neither the administrator's husband nor the housekeeper were listed on the facility's staffing schedule.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure 1 of 2 direct care staff received at least one hour of training in the facility's policy and procedures regarding ( ) that included information in Rule 58A-5.0186, FAC (A).

Findings:

Caregiver A's personnel record revealed a hire date of . The record contained a certificate of training on but it was dated , which was prior to her hire date at this facility, and it did not contain documentation to indicate it was specific to this facility.

On at 12:20 p.m., the administrator confirmed the findings and was unable to provide additional documentation.

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Class III

0091 - Training - Documentation & Monitoring - 58A-5.0191(12) FAC

Based on personnel record reviews and interview, the facility failed to ensure a certificate of training contained the number of hours of the training program for 1 of 2 sampled staff (Administrator).

Findings:

The administrator's personnel record contained a certificate of training that covered major incident reporting, dated . However, the certificate did not contain the number of hours of the training, as required.

On at 12:15 p.m., the administrator confirmed the finding and was unable to provide additional documentation.

Class

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

Based on record review and interview, the facility failed to have an approval letter for its emergency plan from the local emergency management agency annually.

Findings:

On at 9:55 a.m., a request was made to review the facility's most recent approval letter for its emergency plan.

On at 10:01 a.m., the administrator said the plan and most recent approval letter were at the home of a consultant who was updating the plan. An opportunity was provided for the administrator to retrieve the plan and letter but she was unable to do so.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observations, review of Florida Health Finder and interview, the facility failed to maintain a

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copy of its approved emergency power plan at the facility, failed to acquire services or have a process necessary to maintain and test the alternate power source, failed to develop written policies and procedures to ensure the facility can effectively and immediately operate and maintain the alternate power source and any fuel required for the operation of the alternate power source, failed to have a plan to obtain additional fuel in an emergency, failed to acquire monoxide alarms and failed to, within five business days, notify in writing each resident and the resident's legal representative upon submission of its emergency environmental control plan to the local emergency management agency that the plan had been submitted for review and approval and when the plan was implemented.

Findings:

Review of the Florida Health Finder website on at 4 p.m. revealed the facility's emergency power plan was approved on and implemented on .

On at 9:55 a.m., a request was made to review the facility's emergency power plan and approval letter from the local emergency management agency.

On at 10:01 a.m., the administrator said the power plan and its approval letter were at the home of a consultant who was updating the plan. An opportunity was provided for the administrator to retrieve the plan and letter but she was unable to do so.

Observations made on at 12 p.m. revealed an unboxed 8,000 watt portable generator and a 6-gallon filled gasoline container were in the garage. The administrator identified them as the facility's alternate power source and fuel to be used in the event of an emergency. She did not know how much gas would be needed to ensure that in the event of the loss of primary electrical power there would be sufficient fuel available to maintain temperatures at or below 81 degrees Fahrenheit for a minimum of ninety-six hours and she did not know whether there was a local ordinance or other restriction that prohibited the facility from storing additional fuel. She said in the event of a power loss, the facility would be cooled by the use of portable air conditioners that she had not purchased.

On at 12:08 p.m., the administrator said the facility had not acquired services or a process necessary to maintain and test the generator, did not have a plan to obtain additional fuel in the event of an emergency, did not acquire monoxide alarms, did not develop policies and procedures for the alternate power source and fuel and did not notify the residents and their legal representatives in writing when the emergency plan was submitted for review and approval and when it was implemented. She said she planned to contract with a gas company to provide the services to maintain and test the generator and to deliver additional fuel onsite in the event of an emergency.

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In addition to not having a copy of its comprehensive emergency plan onsite, the facility's failure to have all of the required elements in place for its emergency power plan places all of the residents at risk for harm in the event of an emergency.

Class II

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on review of the facility's background clearinghouse employee roster, personnel record reviews and interview, the facility failed to update the employment status for 2 of 2 sampled staff within 10 business days of a change (Administrator & staff A).

Findings:

Review of the facility's online background clearinghouse employee roster on at 9:42 a.m. revealed the administrator and caregiver A were not listed.

Caregiver A's personnel record revealed a hire date of .

The administrator has been in her role at the facility since .

On at 11:45 a.m.. the administrator confirmed the findings.

Unclassified

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

Based on observations, review of the online Agency background screening website and interview, the facility failed to have evidence that two individuals who had access to all of the resident's rooms had an eligible background screening (administrator's husband & housekeeper) .

Findings:

Observations made on at 9:15 a.m. revealed a man who identified himself as the administrator's husband and a woman who said she was a visitor who cleaned the facility (housekeeper) were both present and had unrestricted access to all of the resident's rooms. Other than the residents, there were no other individuals present in the facility. When questioned as to who was in charge of the residents,

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the administrator's husband did not answer the question but rather said the administrator just went to the store and would be returning soon.

On at 9:30 a.m., the housekeeper said she arrived to the facility on the night before, she was leaving this morning and she did not work at the facility. A request was made of the housekeeper to provide her date of birth and social security number so a review of the Agency's background screening website could be checked for an eligible screening however, she declined to provide her social security number. A review of the background screening website, by using only her date of birth and her identified name, revealed no matches.

On at 9:32 a.m., the administrator arrived to the facility at which time, both her husband and the housekeeper left the facility.

On at 9:39 a.m., the administrator said the housekeeper was a friend who helped with sweeping the facility. She said the housekeeper did not have an eligible background screening and, besides the housekeeper's name, she was unable to provide any additional identifiers such as date of birth and social security number. She said caregiver A had been at the facility that morning at 7 a.m. However, she had to leave for an emergency so the administrator's husband was left in charge of the residents that morning.

On at 9:44 a.m., the administrator said neither her husband nor the housekeeper held a current valid , , ( ) and first aid card and her husband did not have an eligible background screening. A review of the background screening website, using the identifying information provided by the administrator revealed her husband did not have any background screening results.

On at 11:20 a.m., caregiver A arrived to the facility. She said she was scheduled to work at the facility on from 7 a.m.-7 p.m. but she had an emergency so she was not able to come in until now. She said she was not at the facility this morning as the administrator initially said.

Neither the administrator's husband nor the housekeeper were listed on the facility's staffing schedule.

Unclassified