STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910165	**11/26/2018**
NAME OF PROVIDER OR SUPPLIER **DUEY'S PLACE**	STREET ADDRESS, CITY, STATE, ZIP CODE **6285 71ST STREET, N.** **PINELLAS PARK, FL 33781**	

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

0000 - Initial Comments

Assisted Living Facility

A Biennial licensure survey was conducted on 11/26/18.

Duey's Place, Assisted Living Facility (License #7122), had deficiencies at the time of this visit.

0083 - Training - First Aid and - 58A-5.0191(4) FAC

Based on record review and interview, the facility failed to ensure that a staff member (1 of 3 in facility with 5 residents) who has completed courses in First Aid and ( ) and holds a currently valid card documenting completion of such courses was in the facility at all times.

Findings included:

Employee record reviews conducted at the facility on beginning at 10:30am revealed that Staff B serves as a Resident Aide/Medication Technician at the facility and provides residents personal care and services. Staff B is not a nurse, emergency medical technician, or paramedic. Staff B's file contained certification in First Aid valid - and certification in ( ) valid - -- there was no evidence of updated, current certification in First Aid and no evidence of updated, current certification in .

On at 11:15am, the Administrator stated that Staff B has not had the updated training in First Aid and as required. On at 1:20pm, both the Administrator and Staff B stated that Staff B was regularly and frequently the only staff at the facility. Staff B acknowledged not having had the updated training in First Aid and as required.

Class III

Based on observation, record review and interview, the facility (current census: 5 residents; licensed for 6) failed to develop a written plan for achieving temperatures at or below 81 degrees Fahrenheit for a minimum of ninety-six (96) hours in the event of the loss of primary electrical power, including information regarding fuel source and fuel storage and plans for storing 48 hours of fuel onsite, as required for a facility with a licensed capacity of 16 beds or less. The facility failed to ensure acquisition of sufficient fuel and safe maintenance of that fuel at the facility to ensure that in the event of

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the loss of primary electrical power there is sufficient fuel available for the alternate power source .

Findings included:

A review facility records and completion of the Assisted Living Facility Generator Assessment was completed along with an interview of the facility Owner/Administrator and co-Owner (Staff B) at the facility on beginning at 1:30pm.

Record review and interview with the facility Administrator revealed that the facility developed a Comprehensive Emergency Management Plan and submitted the Plan to Local Authorities (Pinellas County) on ; the Plan was approved on and implemented on .

Observation, record review, and interviews confirmed that the facility purchased a portable generator that requires gasoline for operation. Surveyor observed the generator stored in a backyard shed and approved fuel containers stored separately in the backyard. Staff B estimated the amount of gasoline stored onsite as 7.2 gallons, sufficient for 10 hours of generator operation. Although there is no local ordinance or other restriction that prohibits additional fuel storage, the facility Owner/Administrator and co-Owner acknowledged the need for construction of a cement , and/or other device for safe storage of the required 48 hours of fuel onsite.

Facility records revealed no written policies and procedures regarding generator operation and plans for storage of required fuel. Interview with the Co-owner (Staff B) revealed that he purchased the generator and is the only person responsible for setup and operation. Staff B stated he would go get additional gasoline when an emergency is declared. The facility Owner/Administrator and co-Owner stated that when a threat of emergency is announced by local Emergency Services Department, fuel will be obtained by Provider/Staff B and stated that, due to limited backyard space, additional fuel is not currently being maintained onsite.

Class III