STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910251	**12/05/2018**
NAME OF PROVIDER OR SUPPLIER **INDIAN OAKS MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **11355 131ST STREET N** **LARGO, FL 33774**	

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

0000 - Initial Comments

Assisted Living Facility

On , , a biennial re-licensure survey was conducted at Indian Oaks Manor. Deficient practice was identified during the survey.

(License #6056)

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

Based on record review and interview the facility failed to ensure there was an interdisciplinary care plan for one Hospice Resident (# 14) residing in the facility.

Findings Included:

During a review of resident records it was revealed that Resident # 14's record did not contain an Interdisciplinary Care Plan specifying the care and services provided by Hospice and the care and services provided by the facility or any documentation of agreement to Hospice services and coordination of care between all parties.

The administrator reviewed the resident's file on and at 6:00pm acknowledged that the file did not contain the required interdisciplinary care plan and documentation.

Class III

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review and interview the facility failed to ensure 1 of 4 sampled staff (Staff C) had submitted a statement from a health care provider, based on an examination conducted within the previous six months, that the staff does not have any signs or symptoms of a communicable ,

Findings Included:

A review of employee records on at11:00am revealed that staff C, with a hire date of did not provide a statement from her health care provider indicating that she does not have any signs or

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symptoms of a communicable .

In an interview with the Administrator at 5:32 pm on the same date, the Administrator acknowledged that the document was not in the Staff C's file.

Class III

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

Based on record review and interview, the facility failed to provide documentation of two hours pre-service orientation training that was signed by the administrator and employee for three (Staff A, Staff B, and Staff C) of four employee records reviewed. Additionally, the facility failed to provide proof of required, facility specific training, within 30 days of employment, in the subjects of facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation (Emergency Procedures Training) for four (Administrator, Staff A, Staff B, and Staff C) of four records reviewed and the facility's resident elopement response policies and procedures (Elopement Training) for three (Administrator, Staff B, and Staff C) of four records reviewed.

Findings included:

A review of employee records conducted on showed that the Administrator was hired on , Staff A was hired on , Staff B was hired on , and Staff C was hired on .

A review of Staff A's, Staff B's, and Staff C's records showed 2 hours pre-service orientation training certificates that were missing required signatures of the Administrator and the employees (photographic evidence obtained).

A review of the employee records for the Administrator, Staff A, Staff B, and Staff C showed no proof of Emergency Procedures Training.

A review of records for the Administrator, Staff B, and Staff C showed no proof of Elopement Training.

The Administrator was interviewed at 5:16 PM on concerning the lack of signatures on Staff A, Staff B, and Staff C's 2 hour pre-service orientation training certificates, the lack of proof of required Emergency Procedures Training for the Administrator, Staff A, Staff B, and Staff C, and the lack of proof of required Elopement Training for the Administrator, Staff B, and Staff C. The Administrator acknowledged and confirmed the lack of proof of the required trainings noted.

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Class III

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

Based on record review and interview, the facility failed to provide proof of required training in the subject of /acquired deficiency (/ Training), within 30 days of employment, for one (Staff A) of four employee records reviewed.

Findings included:

A review of employee records conducted on showed that Staff A had a date of hire of . A review of Staff A's record showed no proof of / Training.

The Administrator was interviewed at 5:15 PM on and they acknowledged that there was no proof of / Training in Staff A's record.

Class III

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

Based on record review and interview, the facility failed to ensure that 4 staff (Staff A, Staff B, Staff C, and the Administrator) of 4 staff reviewed received the required ( ) training on the facility's specific policies and procedures within thirty days of hire.

Findings included:

A review of staff records conducted on revealed the following:

Staff A, hire date /18k, had a certificate that she received for completing a computer training pertaining to .
Staff B, hire date , had a certificate that she received for completing a computer training pertaining to DRNO.

Staff C, hire date , had a certificate that she received for completing a computer training. pertaining to .
The administrator, hire date , had a certificate that she had completed a computer training pertaining to .

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There was no documentation available to indicate the staff had received a facility specific training for within thirty days of hire.
During an interview conducted with the administrator on at 5:32pm, it was confirmed that the training was an online computer training and not specific to the facility.

Class III

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

Based on record review and interview, the facility failed to ensure that training certificates for the subject of the facility's policies and procedures regarding (Training) , contained all necessary documentation including the training program agenda and location of the training program for one (Staff A) of four employee records reviewed.

Findings included:

A review of employee records conducted on showed that Staff A had a date of hire of . A review of Staff A's record showed no proof of Training.

The Administrator was interviewed at 5:22 PM on concerning the lack of proof of Training in Staff A's record. The Administrator left the room and came with a documented list of employees who participated in training and the list indicated that Staff A had Training, however, there was no documentation of the training program agenda or the location of the training program.
The Administrator acknowledged that the required information was missing.

Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on observation, interview, and record review, the facility failed to ensure that menu items were substituted with foods of equal nutritional value.

Findings included:

A review of the registered dietitian approved menu for showed the lunch meal as roasted pork, roasted potato, broccoli, tossed salad, dinner roll, and fruit. The meal served on was shredded pork, yellow rice, black beans, Cuban bread and fresh fruit. There were no substitutions observed for the broccoli and tossed salad as required.

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An interview was conducted with the Administrator at 1:14 PM on _____ concerning the lunch meal and lack of substitutions for the broccoli and tossed salad as required. The Administrator acknowledged that the food items were omitted and not substituted with items of equal nutritional value during the lunch meal.

Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on record review and interview, the facility failed to ensure that four (A, B, C, D) of four staff records contained job descriptions as required.

Findings included:

During a review of staff records on , it was revealed that there was no documentation in the administrator's file of her job description.
Staff A, hire date _____ , did not have a document stating her job description.
Staff B hire date _____ did not have documentation stating the employee's job description.
Staff C hire date did not have documentation stating the employee's job description.

During an interview with the administrator conducted at 5:30pm, the administrator acknowledged that the staff did not
have documentation with a job description in their file.

Class III

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Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c); 59A-35.090(2)(d)-(3)

Based on record review and interview, the facility failed to provide required documentation of currently valid Level 2 background screenings with no more than a 90-day gap in service for staff that provided personal care to the facility's residents for one (Staff C) of four employee records sampled.

Findings included:

A review of Staff C's record conducted on showed that they had a date of hire of . A review of the current week's schedule showed that Staff C was included on the facility's direct care staffing schedule for the 10 PM- 6 AM shift.

A review of Staff C's Level 2 background screening showed an eligibility date of (photographic evidence obtained). Staff C's application showed that their last position that required a Level 2 background screening ended in . There was no proof on record that there was less than a 90 break in service before being hired at the current assisted living facility.

The Administrator was interviewed at 5:30 PM on concerning the lack of proof that Staff C had less than a 90 day break in service for positions that require a Level 2 background screening. The Administrator acknowledged that they were unable to provide this documentation.

Unclassified