STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966352	**12/07/2018**
NAME OF PROVIDER OR SUPPLIER **BIMINI MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **3791 67 AVENUE, NORTH** **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 .

The Bimini Manor, Assisted Living Facility (License #10566) had deficiencies at the time of this visit.

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

Based on record review and interview, the facility failed to ensure that 1 of 2 staff (Staff B) who provide 8 current residents personal care services have submitted within 30 days after beginning employment a written statement from a health care provider documenting that the individual does not have any signs or symptoms of a communicable . The facility also failed to ensure that 1 of the 2 staff (Staff B) submitted evidence of an annual negative examination.

Findings included:

Employee Record reviews conducted at the facility on beginning at 10:00 am revealed that Staff B is a Resident Aide/Med Tech who provides residents' personal care services including assistance with self-administration of medications. AHCA Surveyor was unable to locate Staff B's employment start date in Staff B's Employee Record. The Administrator stated on at 10:10am that Staff B has been employed at the facility for about 8 months. The Administrator was unable to provide specific employment start date for Staff B.

An interview was conducted with Staff B on at 7:36am. Staff B stated that she has worked at the facility for 2 years. Staff B checked a resident record to get exact start date, and stated she has been employed as a Resident Aide/Med Tech since .

As of Employee Record review, there was no evidence of testing or statement of freedom from communicable in Staff B's file.

Class III

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

Based on record review and interview, the facility (with 8 current residents) failed to provide a preservice

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orientation of at least two hours for 1 of 1 Assisted Living Facility employees (Staff B) who has not previously completed core training prior to interacting with residents. The facility failed to ensure that 1 of 2 employees (Staff B) received a minimum of 1 hour in-service training in control, including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility failed to ensure 2 of 2 employees (Staff A and Staff B) received in-service training regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment. The facility failed to ensure 1 of 2 employees (Staff B) received a minimum of 1 hour in-service training within 30 days of employment that covers reporting adverse incidents and facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. The facility failed to ensure 1 of 2 employees (Staff B) received a minimum of 1 hour in-service training within 30 days of employment that covers resident rights in an Assisted Living Facility and recognizing and reporting resident , neglect, and .

Findings included:

Employee Record reviews conducted at the facility on beginning at 10:00 am revealed that Staff A and Staff B are Resident Aides/Med Techs who provide residents' personal care services including assistance with self-administration of medications. Staff A and Staff B are not nurses, certified nursing assistants, or home health aides. Staff A previously completed CORE training; Staff B has not completed CORE training. AHCA Surveyor was unable to locate employment start dates in employee records for Staff A and Staff B. The Administrator stated on at 10:05am that Staff A was previously employed and restarted employment about 4 months ago. The Administrator stated on at 10:10am that Staff B has been employed at the facility for about 8 months. The Administrator was unable to provide specific employment start dates for Staff A and Staff B.

An interview was conducted with Staff A on at 10:19am. Staff A stated she has been "on staff a long time, started 2005 or 2006 when the facility had a different name, returned , exact date unknown." Staff A stated that she has had continued involvement with facility, including cleaning every week, but has been employed as a Resident Aide/Med Tech since , 2018. There was no evidence of in-service training in Staff A's file regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment.

An interview was conducted with Staff B on at 7:36am. Staff B stated that she has worked at the facility for 2 years. Staff B checked a resident record to get exact start date, and stated she has been employed as a Resident Aide/Med Tech since . There was no evidence of Preservice Orientation training in Staff A's file and no evidence of training in control, no evidence of training regarding the facility's resident elopement response policies and procedures, no evidence of training in

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reporting adverse incidents and facility emergency and evacuation procedures, and no evidence of training in resident rights and recognizing and reporting resident , neglect, and .

On at 10:15am, the Administrator stated that Staff B's paperwork disappeared, that she had gone to get it and it had disappeared. Staff B stated on at 7:40am that she brought her training certificates from previous employment to the facility after AHCA Surveyor had left the facility on .

Class III

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

Based on record review and interview, the facility failed to ensure that 1 of 2 employees (Staff B) who provide direct resident personal care services have completed a one-time education course on / , (/).

Findings included:

Employee Record reviews conducted at the facility on beginning at 10:00 am revealed that Staff B is a Resident Aide/Med Tech who provides residents' personal care services including assistance with self-administration of medications. AHCA Surveyor was unable to locate Staff B's employment start date in Staff B's Employee Record. The Administrator stated on at 10:10am that Staff B has been employed at the facility for about 8 months. The Administrator was unable to provide specific employment start date for Staff B.

An interview was conducted with Staff B on at 7:36am. Staff B stated that she has worked at the facility for 2 years. Staff B checked a resident record to get exact start date, and stated she has been employed as a Resident Aide/Med Tech since .

As of Employee Record review, there was no evidence of / training in Staff B's file.

Class III

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

Based on record review and interview, the facility failed to ensure that a staff member who has completed courses in First Aid and , ( ) and holds a currently valid card documenting completion of such courses is in the facility at all times. The facility failed to ensure that 1 of 2 employees (Staff B) who provide direct resident personal care services and are frequently the only

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staff in the facility have completed training in First Aid and .

Findings included:

Employee Record reviews conducted at the facility on beginning at 10:00 am revealed that Staff B is a Resident Aide/Med Tech who provides residents' personal care services including assistance with self-administration of medications. AHCA Surveyor was unable to locate Staff B's employment start date in Staff B's Employee Record. The Administrator stated on at 10:10am that Staff B has been employed at the facility for about 8 months. The Administrator was unable to provide specific employment start date for Staff B.

An interview was conducted with Staff B on at 7:36am. Staff B stated that she has worked at the facility for 2 years. Staff B checked a resident record to get exact start date, and stated she has been employed as a Resident Aide/Med Tech since .

The Administrator and Staff B both confirmed that Staff B is the sole staff person at the facility during her assigned shift. As of Employee Record review, there was no evidence of training in First Aid and no evidence of training in in Staff B's file.

Class III

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(6) FAC 429.52 (6), FS

Based on record review and interview, the facility failed to ensure that 1 of 2 staff (Staff B) who provide 8 current residents assistance with self-administration of medications has completed required training in providing assistance with self-administration of medications.

Findings included:

Employee Record reviews conducted at the facility on beginning at 10:00 am revealed that Staff B is an unlicensed Resident Aide/Med Tech who provided residents' personal care services including assistance with self-administration of medications. AHCA Surveyor was unable to locate Staff B's employment start date in Staff B's Employee Record. The Administrator stated on at 10:10am that Staff B has been employed at the facility for about 8 months and provides residents assistance with self-administration of medications.

An interview was conducted with Staff B on at 7:36am. Staff B stated that she has worked at

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the facility for 2 years. Staff B checked a resident record to get exact start date, and stated she has been employed as a Resident Aide/Med Tech since . Staff B stated that she provided residents assistance with self-administration of medications.

As of Employee Record review, there was no evidence of initial or updated training in providing assistance with self-administration of medications in Staff B's file.

Class III

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

Based on record review and interview, the facility failed to ensure that 1 of 2 employees (Staff B) who provided 8 current residents personal care services received at least one hour of training in the facility's policy and procedures regarding ( ).

Findings included:

Employee Record reviews conducted at the facility on beginning at 10:00 am revealed that Staff B is a Resident Aide/Med Tech who provides residents' personal care services including assistance with self-administration of medications. AHCA Surveyor was unable to locate Staff B's employment start date in Staff B's Employee Record. The Administrator stated on at 10:10am that Staff B has been employed at the facility for about 8 months. The Administrator was unable to provide specific employment start date for Staff B.

An interview was conducted with Staff B on at 7:36am. Staff B stated that she has worked at the facility for 2 years. Staff B checked a resident record to get exact start date, and stated she has been employed as a Resident Aide/Med Tech since .

As of Employee Record review, there was no evidence of training in the facility's policy and procedures regarding ( ) in Staff B's file.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, record review and interview, the facility (current census: 8 residents; licensed for 8) failed to maintain a copy of its emergency power plan that is readily available at the facility. The facility failed to maintain the written policies and procedures in a manner that makes them readily

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available at the licensee's physical address for review by a legally authorized entity. The facility failed to provide 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 that includes 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 the loss of primary electrical power there is sufficient fuel available for the alternate power source.

Findings included:

Surveyor reviewed facility records, conducted the Assisted Living Facility Generator Assessment, and interviewed the facility Owner/Administrator at the facility on beginning at 9:30am.

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 on 11/29/18. The Owner/Administrator provided a copy of the receipt from local Emergency Management Services of the updated emergency power plan. The Owner/Administrator stated the plan was accepted as complete, approval is pending, and the book with the plan will be returned to the facility once approved. The Owner/Administrator stated she did not keep a copy of the Plan and was unable to provide records of written policies and procedures regarding generator operation and plans for storage of required fuel.

Observation and interview confirmed that the facility purchased a portable generator that requires gasoline for operation. Surveyor observed the generator stored in a box adjacent to the facility on a side , outside a sliding glass door. Although there is no local ordinance or other restriction that prohibits fuel storage, the facility Owner/Administrator stated that fuel is not currently being maintained onsite.

Class III