STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11922155	R 01/03/2019
NAME OF PROVIDER OR SUPPLIER **BELLE VISTA BLUFFS**	STREET ADDRESS, CITY, STATE, ZIP CODE **1138 ROSEMARY DRIVE** **LARGO, FL 33770**	

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

0000 - Initial Comments

Assisted Living Facility

On . . . . . , a third revisit to a . . . . Complaint (CCR#2018009786 and 2018008167) survey was conducted at Belle Vista Bluffs (License #7888) in Largo, Florida. The facility had deficiencies at the time of the visit.

0053 - Medication - Administration - 58A-5.0185(4) FAC

Based on observation and interview the facility failed to ensure only licensed staff provide medication administration to 1 (Resident #1) of 6 residents who currently reside in the facility.

Findings included:

During medication observation conducted on at 12:02pm, Staff A opened Resident #1's , . Sprinkle 125mg capsule and sprinkled the contents on the resident's food. Staff A proceeded to feed Resident #1 the food and the medication mixture.

During an interview with the Administrator on at 12:06pm stated "the staff fed Resident #1 because they cannot eat on their own and the same with her medications". The Administrator also confirmed the facility does not employ nurses.

Class III

0079 - Staffing Standards - Levels - 58A-5.019(3) FAC

Based on observation, record review and interview the facility failed to maintain a current written work schedule available for review by a state agency.

Findings Included:

During a review of the facility records on they did not include a current written work schedule available for review.

An interview with the Administrator was conducted on . . . . . at 11:09am. The Administrator confirmed they do not have a current staffing schedule.

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Class III

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(5) FAC

Based on observation, record review and interview, the facility failed to ensure 1 staff (Staff A) assisting residents with self-administration of medication had proof of training on sire at the facility.

Findings included:

During medication observation conducted on . . . . . at 12:02pm, Staff A was observed performing medication administration with Resident #1.

Record review conducted on revealed there was no credentials or assistance with self-administered medications training.

During an interview with the Administrator on . . . . . at 11:53am, the Administrator confirmed Staff A was not a nurse and there was no assistance with self-administered medications training as there was no file in the facility for Staff A.
Class III

Z813 - Results of Screening & Notification In File - 59A-35.090(3)(c), FAC

Based on employee record review and interview, the facility failed to maintain the eligibility results of employee Level II Background screening 2 (Staff A and Staff B) of 2 employee records reviewed.

Findings Included:

Attempted employee record review conducted on . . . . . revealed there were no results of Staff A or Staff B Level II Background screening.

Interview conducted on at 11:53am with the Administrator revealed there no employee records at the facility for Staff A or Staff B.

Unclassified