STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968833	02/05/2019
NAME OF PROVIDER OR SUPPLIER **LOVING CARE OF THE TREASURE COAST, LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2102 SW LARCHMONT LANE PORT SAINT LUCIE, FL 34984**	

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

0000 - Initial Comments

An unannounced Relicensure survey was conducted on at Loving Care Of The Treasure Coast , LLC, License #12683. The facility had deficiencies identified at the time of the survey.

0077 - Staffing Standards - Administrators - 429.176 FS; 429.52( ),58A-5.019(1) FAC

Based on record review and an interview, the facility failed to ensure a qualified Manager was appointed for this facility whose Administrator was the administrator for more than one ALF (Assisted Living Facility).

The findings included:

On at 11:15 AM, the Assistant Administrator stated during interview that she was not the Manager of this facility since she was the administrator of another facility.

Review of the personnel files revealed there was no Manager, who had passed the CORE exam, designated for this facility.

This facility's administrator is the administrator of two ALFs. Therefore, the facility is required to have a Manager appointed in writing with CORE training and the passing of the CORE exam. The designated Manager cannot be the administrator or manager of another facility. The facility provided no additional information for review at the time of the survey.

Class III

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

Based on record review and an interview, the facility failed to ensure 2 out of 2 sampled staff (Staff A and B) had completed 2 hours of Preservice Orientation with a certificate signed by the Administrator and staff member prior to interacting with residents.

The findings included:

Review of the personnel files for Staff A (hired) and Staff B (hired), who work as caregivers for residents, revealed no certificates of a 2 hour Preservice Orientation, including training in Residents' Rights and ALF (assisted living facility) services, signed by both the Administrator and the

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employee.

The documentation of this training for Staff A and B was requested from the Assistant Administrator at 1:00 PM. The facility provided no additional documentation of the required training for review at this time.

Class III

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

Based on record review and an interview, the facility failed to ensure 1 out of 2 sampled staff (Staff B) had completed inservice training in / within 30 days of hire.

The findings included:

Review of the personnel file for Staff B (hired), who work as a caregiver for residents, revealed no certificates of inservice training in / .

The documentation of this training for Staff B was requested from the Assistant Administrator at 1:00 PM. The facility provided no additional documentation of the required training for review at this time.

Class III

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

Based on record review and an interview, the facility failed to ensure that 1 out of 2 unlicensed staff members (Staff A) who provided assistance with self-administered medications had successfully completed a minimum of 6 hours initial training on providing assistance with self-administered medications and safe medication practices in an ALF (Assisted Living Facility).

The findings included:

The personnel file for Staff A was reviewed for documentation of a minimum of 6 hours of initial training on providing assistance with self-administered medications and safe medication practices in an ALF. The last documented training was a 4 hour course dated .

There was no documentation to show completion of the 6 hour initial training in assisting with

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SUMMARY STATEMENT OF DEFICIENCIES
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self-administration of medication, or of a 4 hour initial course with an additional 2 hours of training that focuses on syringes, [illegible] stockings, [illegible] bags and vital signs described in 58A-0191(6)(b)2.h.-n., F.A.C. (Florida Administrative Code), effective .

During interview with Staff A on at 11:00 AM, she confirmed that she assisted residents with medication administration and was observed assisting Resident #1 with medication on this date at 1:00 PM. The facility provided no additional documentation for review at this time.

Class III

0162 - Records - Resident - 58A-5.024(3) FAC

Based on record review and an interview, the facility failed to obtain written informed consent by the resident or the resident's representative for unlicensed staff to assist with medication, as described in Rule 58A-5.0181, F.A.C., for 2 out of 2 sampled residents (Residents #1 and #2).

The findings included:

On , the written consents for unlicensed staff to assist with medication for Residents #1 and #2 were reviewed. Both residents had been admitted to the facility on . The written consents located in the residents' files were not signed by either the residents or their representatives.

During interview with the Assistant Administrator on at 1:00 PM, she acknowledged that the residents or their representatives had not signed the consents as of this date. The facility provided no additional documentation for review at this time.

Class

0167 - Resident Contracts - 58A-5.025 FAC; 429.24 FS

Based on record review and an interview, the facility failed to offer a contract for execution by the resident or the resident's representative before or at the time of admission for 2 out of 2 sampled residents (Residents #1 and #2).

The findings included:

On , the contracts for Residents #1 and #2 were reviewed. Both residents had been admitted to the facility on . The contracts located in the residents' files were not signed by either the

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residents or their representatives.

During interview with the Assistant Administrator on at 1:00 PM, she acknowledged that the residents had not signed the contracts, and that the contracts had not been executed by their representatives as of this date. The facility provided no additional documentation for review at this time.

Class III

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

Based on record review and an interview, the facility failed to submit their Comprehensive Emergency Management Plan (CEMP) to the county timely for their annual approval.

The findings included:

On at 10:40 AM, the CEMP approved on was reviewed with the Administrator's designee. She stated that the annual approval of the CEMP had not been obtained yet for this plan that expires on .

On at 4:25 PM, a county representative with the Division of Emergency Management stated that the facility's CEMP had not yet been submitted as of this date for their annual approval by the county, and that their current plan will expire on . On at 7:56 AM, a county representative stated that the CEMP was reviewed and required revisions. The CEMP is expired as of .

Class III