STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966352	R 02/12/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BIMINI MANOR	**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 revisit to a biennial survey was conducted on at Bimini Manor (Lic. #10566). At the time of the survey, the facility had deficiencies.

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

Based on record review and interview, the facility failed to ensure that one of one staff sampled (B) who had been employed at least 30 days had a ( ) evaluation that had been updated on an annual basis.

Findings included:

A personnel file review of Staff B's latest assessment during the revisit found a document from . Thus, it had expired . Further review of the record revealed no subsequent -related documentation, and interview with the administrator at 11:20am on provided no explanation for this omission.

Class III

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

Based on record review and interview, the facility failed to ensure that one of one staff sampled who had been employed at least 30 days (B) had received all required training.

Findings included:

A review of the personnel file of Staff B (hired) during the revisit found that this employee had no documentation verifying completion of the following training: a) reporting adverse incidents and facility emergency/evacuation procedures; b) resident rights and recognizing & reporting resident , neglect and , ; and c) control.

Interview with the administrator at 11am on revealed that she thought Staff B had provided

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her with the necessary documentation when she brought a pile of papers from her other job.

Class III

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

Based on record review and interview, the facility failed to ensure that one of one staff sampled (B) had current First Aid (FA) and ( ) certification.

Findings included:

Personnel record review during the revisit indicated that although Staff B had FA and , these certifications had expired and , respectively and were no longer current. Further review of the file found no subsequent trainings in either FA or for Staff B.

In an interview with the administrator at 11:50am on , the administrator said that Staff B had updated her training in both First Aid and , but the administrator had not been able to file the documents, and she was not able to locate them during the survey.

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 unlicensed staff had documentation of completing required initial training on assisting with self-administration of medication and required annual updates for one of one staff sampled (B) prior to performing this duty.

Findings included:

A review of Staff B's personnel record during the follow-up visit found no documentation of any medication assistance class having been taken--either the 4 hour course with a current 2 hour update, or the current 6 hour class.
Interview with the administrator at 10:45am on confirmed that this employee regularly assisted residents take their medications as a part of her duties. Further interview provided no explanation for this omission of the medication training.

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SUMMARY STATEMENT OF DEFICIENCIES
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Class III

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

Based on record review and interview, the facility failed to ensure staff had documentation of training related to the facility's policy and procedures regarding ( ) and Advance Directives located in the file of one of one resident sampled (B).

Findings included:

Personnel file review still found no documentation in Staff B's record verifying completion of any training regarding the facility's policy/procedures pertaining to and Advance Directives. Interview with the administrator at 1pm on . . . . . provided no clarification for this continued discrepancy.

Class III

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

Based on record review and interview, the facility continued to fail to ensure that the signed Attestation of Compliance with Background Screening (AHCA Form 3100-0008) was contained in the personnel file for one of one staff sampled (B).

Findings include:

A personnel record review during the revisit indicated that the file for Staff B (hired) did not include a signed copy of the Attestation of Compliance with Background Screening (AHCA Form 3100-0008). In an interview with the administrator at 10:10am on , she stated that she was not aware that this documentation was missing.

Unclassified

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on record review and interview, the facility had not placed either a former employee (Staff A) nor current employee (B) on its AHCA Background Screening Employee Roster.

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Findings include:

An internal review of the facility's Background Screening Employee Roster conducted on found neither Staff A nor B, who had been identified during the biennial relicensure survey, included on this roster. At 11:15 am on , the administrator stated in an interview that she had been struggling to navigate the background screening website, and therefore had not been able to add either Staff A or B to her facility's Employee roster.

Unclassified