STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967498	**02/18/2019**
NAME OF PROVIDER OR SUPPLIER **SWAN AT LAKE CONWAY ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **3714 ST MORITZ STREET** **ORLANDO, FL 32812**	

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

0000 - Initial Comments

The re-licensure survey was conducted on . Swan at Lake Conway, license # 11542, had deficiencies at the time of the visit.

0008 - Admissions - Health Assessment - 429.26( ) FS; 58A-5.0181(2) FAC

Based on record reviews and interview, the facility failed to ensure an 1823 health assessment form was complete for 2 of 3 sampled residents (#4 and #5).

Findings:

Resident #4's record revealed a facility admission date of . A current 1823, dated , did not contain the examiner's printed name and address, as required. The record did not contain documentation to indicate the facility contacted the health care provider to obtain the omitted information.

On at 4:13 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Resident #5's record revealed a facility admission date of . Page 5 of his current 1823, dated , and was not completed. The information was not documented elsewhere in the record.

On at 4:25 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Class III

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

Based on observations, record reviews and interviews, the facility retained 1 of 6 sampled residents (#1) who exceeded the continued residency criteria in an Assisted Living Facility (ALF.)

Findings:

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

The facility holds a standard license.

Resident #1's record revealed a facility admission date of . Her diagnoses included , . Sleep , , , and , . A current 1823 health assessment form, dated , did not indicate that she was bedridden however, the record contained health care provider's progress notes, dated , , , , and that all documented she was bedridden or bedbound.

Additionally, she was never assisted out of bed during the survey.

On at 2:45 p.m. caregiver A said the resident never gets out of her bed.

On at 4:21 p.m. the owner said the resident was not bedridden. When questioned as to why the resident was not assisted out of bed during the survey, she said because the resident could not tolerate sitting up due to , in her and .

Photographic evidence obtained.

Class III

0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28( ) FS 429.27

Based on record reviews and interview, the facility failed to develop written policies and procedures that addressed reporting resident , neglect, and , and control, sanitation, and universal precautions.

Findings:

On at 4:30 p.m. a request was made to review the facility's written policies and procedures that addressed reporting resident , neglect, and , and control, sanitation, and universal precautions.

On at 4:45 p.m. the owner provided a policy and procedures binder however, neither of the requested policies were in the binder. She said the facility did not have the requested policies.

Class III

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

0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC; 429.41(1)(a)3 & 3.(i)

Based on record review and interview, the facility failed to conduct a minimum of two resident elopement prevention and response drills per year.

Findings:

The facility has been owned and licensed since .

Caregiver A was hired on . On at 1:09 p.m. she said she never participated in an elopement drill at the facility.

On at 3:30 p.m. a request was made to review the facility's documented elopement drills.

On at 4:15 p.m. the owner provided a binder that contained facility records however, it did not contain documentation to indicate the facility conducted the required elopement drills.

On at 4:45 p.m. the owner said the facility had never done a resident elopement drill.

Class III

0052 - Medication - Assistance with Self-Admin - 429.256( ); 58A-5.0185 (3)

Based on observations, record reviews and interview, the facility failed to ensure the unlicensed caregiver (owner) who assisted a resident (#5) with self-administered medications followed the correct procedure.

Findings:

Observations made during a medication pass for resident #5 on at 12:53 p.m. revealed the resident sat in a wheelchair near the medication cart. The unlicensed owner washed her , donned gloves, then she unlocked the medication cart. She removed two bottles of medication and said to the resident "this is your , medicine" and "this is to relax you." She poured the medications into a cup then handed the cup to the resident, who took the pills with water and without assistance. The owner observed him take the medications then she signed the Medication Observations Record (MOR).

The owner did not read the prescription labels aloud, as required.

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On ... at 1:05 p.m. the owner confirmed the findings.

Class III

0056 - Medication - Labeling and Orders - 58A-5.0185(7) FAC

Based on record reviews and interview, the facility failed to contact a health care provider to request revised instructions for 1 of 3 sampled residents (#4) who had a medication order to be given "as needed."

Findings:

Resident #4 was admitted to the facility on . A current 1823, dated , indicated that he required assistance with self-administered medications. The 1823 contained an order from a health care provider for 50 milligrams (mg) by twice a day as needed however, the order did not provide the circumstances under which it would be appropriate for the resident to request the medication.

The resident's record did not contain documentation to indicate the facility contacted a health care provider to request revised instructions.

On at 4:10 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure 1 of 3 staff (administrator) submitted a written statement from a health care provider documenting freedom from communicable within 30 days after beginning employment.

Findings:

The administrator was hired on . His personnel record did not contain a written statement from a

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health care provider documenting freedom from communicable , as required.

On at 4:49 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure that 3 of 3 sampled staff (A, B, and administrator) received the required in-service training within 30 days of employment.

Findings:

1. Caregiver A was hired on . Her personnel record contained a certificate of training, dated ' ," on nutrition and safe food handling however, the certificate and the dietician instructor's signature were copied and the date and name of the caregiver were -written onto the copied certificate.

On at 5 p.m. the owner confirmed the findings, said she provided caregiver A with training on nutrition and safe food handling, and she used a copy of the dietician's training certificate for proof of the training. The certificate did not contain the owner's name and credentials to assist in determining whether caregiver A did in fact receive the training.

2. Caregiver B was hired on . Her personnel record did not contain documentation to indicate she received the required training on the facility's policies and procedures on reporting resident , neglect, and and in-service training regarding the facility's resident elopement response policies and procedures. In addition, her 2-hour preservice orientation training certificate, dated , was from an online provider and the agenda did not contain resident rights and the facility's license type and services offered.

3. The administrator was hired on . His personnel record did not contain documentation to indicate he received the required training on reporting major and adverse incidents and emergency procedures including chain-of-command and staff roles relating to emergency evacuation and in-service training regarding the facility's resident elopement response policies and procedures.

On at 4:50 p.m. the owner confirmed the findings and was unable to provide additional

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documentation.

Photographic evidence obtained.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure 1 of 3 sampled staff (B) completed a one-time education course on ( ) and ( ) within 30 days of employment.

Findings:

Caregiver B was hired on . Her personnel record did not contain documentation to indicate she completed a one-time education course on and , as required.

On at 5:05 p.m. the owner confirmed the finding and was unable to provide additional documentation.

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

Based on record reviews and interview, the facility failed to ensure a staff member who held a current valid ( ) card was in the facility at all times.

Findings:

Caregiver B was hired on . Her personnel record did not contain a valid card.

Review of the facility's staffing schedule revealed that on caregiver B worked alone from 3 p.m. to 7 a.m.

On at 5:10 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure 1 of 2 unlicensed staff (A) who assisted with self-administered medications completed the initial training.

Findings:

On at 1:09 p.m. unlicensed caregiver A said she assisted residents with self-administered medications.

Caregiver A was hired on . Her personnel record contained a 4-hour certificate of training, dated , on providing assistance with self-administered medications however, the certificate did not contain credentials to indicate whether the instructor was a registered nurse or licensed pharmacist.

The record also contained a 6-hour certificate of training, dated , however, the training was specific for the agency for persons with .

On at 5:13 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(7) FAC

Based on personnel record reviews and interview, the facility failed to ensure the person designated as responsible for the facility's food service and day-to-day supervision of food service staff (owner) obtained a minimum of 2 hours continuing education annually from an approved trainer.

Findings:

On at 3:30 p.m. the owner identified herself as the person designated as responsible for the facility's food service and day-to-day supervision of food service. Her personnel record contained only one 2-hour certificate of training, dated ' ,' on nutrition and food service however, the certificate and instructor's signature were copies and the date and owner's name were written on the copied certificate.

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On [redacted] at 3:45 p.m. the owner confirmed the findings and said she used a blank copy of the dietician's certificate of training to document that she received the required training, which is falsification of a document.

Photographic evidence obtained.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure certificates of training were not altered for 2 of 3 sampled staff (A and B).

Findings:

Caregiver A was hired on [redacted]. Her personnel record contained certificates of training for resident rights, reporting major incidents, elopement procedures, and emergency procedures and evacuation however, the location of training on the certificates was another facility's name that was crossed off and this facility's name was [redacted]-written on the certificates.

Caregiver B was hired on [redacted]. Her personnel record contained certificates of training for resident rights, reporting major incidents, and emergency procedures and evacuation however, the location of training on the certificates was another facility's name that was crossed off and this facility's name was [redacted]-written on the certificates.

On [redacted] at 4:50 p.m. the owner confirmed the findings.

Photographic evidence obtained.

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on record reviews and interview, the facility failed to maintain all sanitation inspection reports issued by the county health department within the last 2 years.

Findings:

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SUMMARY STATEMENT OF DEFICIENCIES
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On at 3:45 p.m. a request was made to review the facility's health department group home inspections.

On at 4:11 p.m. the owner provided payment receipts only and said the facility was never issued an inspection report from the health department.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure the personnel record for 2 of 3 sampled staff (administrator) contained a copy of the employment application with references furnished.

Findings:

Caregiver A was hired on . Her personnel record did not contain an employment application with references furnished for this hire date, as required.

The administrator was hired on . His personnel record did not contain references furnished, as required.

On at 4:33 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Class

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

Based on record reviews and interview, the facility failed to record a semi-annual for 1 of 2 residents (#4) who received assistance with the Activities of Daily Living (ADLs.)

Findings:

Resident #4's record revealed a facility admission date of . A current 1823 health assessment

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form, dated , indicated that he required assistance with his ADLs. His record contained recorded only on and and not semi-annually, as required.

On at 4:14 p.m. the owner confirmed the findings and said there were no additional recorded .

Class III

0163 - Records - Resident, Penalties for Alteration - 429.49 FS

Based on record reviews and interview, the facility failed to ensure a certificate of training for 1 of 4 sampled staff (owner) was not falsified.

Findings:

On at 3:30 p.m. the owner identified herself as the person designated as responsible for the facility's food service and day-to-day supervision of food service. Her personnel record contained only one 2-hour certificate of training, dated ' ,' on nutrition and food service however, the certificate and instructor's signature were copies and the date and owner's name were written on the copied certificate.

On at 3:45 p.m. the owner confirmed the findings and said she used a blank copy of the dietician's certificate of training to document that she received the required training, which is falsification of a document.

Photographic evidence obtained.

Class III

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

Based on record reviews and interviews, the facility failed to ensure 2 of 2 sampled residency agreements (#4 and #5) contained all of the required information.

Findings:

Resident #4's residency agreement was dated .

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Resident #5's residency agreement was dated .

Neither agreement contained a written refund policy, as required.

On at 4:12 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Class

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

Based on personnel record reviews, review of the Agency's background screening website and interview, the facility failed to maintain the current eligibility results of a background screening in the personnel record for 1 of 3 staff (Administrator) who was in a role that required a background screening.

Findings:

The administrator was hired on . The only background screening in his file indicated "agency review required."

Review of the Agency's background screening website on at 3:20 p.m. revealed he had an eligible screening on . Therefore, the eligible result should have been maintained in his personnel record.

On at 4:30 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Unclassified

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

Based on review of the facility's online background clearinghouse employee roster, personnel record reviews and interview, the facility failed to update the employment status for 1 of 3 sampled staff (B) within 10 business days of a change.

Findings:

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Review of the facility's staffing schedule revealed that caregiver B was scheduled to work from 7 a.m. to 3 p.m. on , , , , , and .

Review of the facility's online background clearinghouse employee roster on at 9:41 a.m. revealed caregiver B was not listed.

Review of caregiver B's personnel record did not reveal a hire date. On at 2 p.m. the owner said caregiver B was hired on . Therefore, caregiver B should have been listed on the roster.

On at 3:05 p.m. the owner confirmed the findings.

Photographic evidence obtained.

Unclassified

Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on personnel record reviews, review of the facility's online background screening clearinghouse roster, and interview the facility failed to ensure 1 of 3 staff (B) who required a background screening, did not have any disqualifying offenses.

Findings:

Review of the facility's staffing schedule revealed that caregiver B was scheduled to work from 7 a.m. to 3 p.m. on , , , , , and .

Review of the facility's online background clearinghouse employee roster on at 9:41 a.m. revealed caregiver B was not listed.

Review of caregiver B's personnel record did not reveal a hire date and the only eligible background screening result in the record, dated , was a copy obtained by another facility. On at 2 p.m. the owner said caregiver B was hired on therefore, the facility's roster should have been updated to reflect caregiver B's hire date so the facility could request its own result.

On at 3:05 p.m. the owner confirmed the findings.

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Photographic evidence obtained.

Unclassified

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

Based on personnel record reviews and interview, the facility failed to ensure 3 of 3 personnel records (A, B, and administrator) contained An Attestation of Compliance with Background Screening Requirements.

Findings:

Caregiver A was hired on . . . . . .

Caregiver B was hired on . . . . . .

The administrator was hired on . . . . . .

None of their personnel records contained an attestation of compliance with background screening requirements, as required.

On at 4:38 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Unclassified

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
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SUMMARY STATEMENT OF DEFICIENCIES
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0000 - Initial Comments

The re-licensure survey was conducted on . Swan at Lake Conway, license # 11542, had deficiencies at the time of the visit.

0008 - Admissions - Health Assessment - 429.26( ) FS; 58A-5.0181(2) FAC

Based on record reviews and interview, the facility failed to ensure an 1823 health assessment form was complete for 2 of 3 sampled residents (#4 and #5).

Findings:

Resident #4's record revealed a facility admission date of . A current 1823, dated , did not contain the examiner's printed name and address, as required. The record did not contain documentation to indicate the facility contacted the health care provider to obtain the omitted information.

On at 4:13 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Resident #5's record revealed a facility admission date of . Page 5 of his current 1823, dated , and was not completed. The information was not documented elsewhere in the record.

On at 4:25 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Class III

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

Based on observations, record reviews and interviews, the facility retained 1 of 6 sampled residents (#1) who exceeded the continued residency criteria in an Assisted Living Facility (ALF.)

Findings:

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The facility holds a standard license.

Resident #1's record revealed a facility admission date of . Her diagnoses included , . Sleep , , , and , . A current 1823 health assessment form, dated , did not indicate that she was bedridden however, the record contained health care provider's progress notes, dated , , , , and that all documented she was bedridden or bedbound.

Additionally, she was never assisted out of bed during the survey.

On at 2:45 p.m. caregiver A said the resident never gets out of her bed.

On at 4:21 p.m. the owner said the resident was not bedridden. When questioned as to why the resident was not assisted out of bed during the survey, she said because the resident could not tolerate sitting up due to , in her and .

Photographic evidence obtained.

Class III

0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28( ) FS 429.27

Based on record reviews and interview, the facility failed to develop written policies and procedures that addressed reporting resident , neglect, and , and control, sanitation, and universal precautions.

Findings:

On at 4:30 p.m. a request was made to review the facility's written policies and procedures that addressed reporting resident , neglect, and , and control, sanitation, and universal precautions.

On at 4:45 p.m. the owner provided a policy and procedures binder however, neither of the requested policies were in the binder. She said the facility did not have the requested policies.

Class III

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SUMMARY STATEMENT OF DEFICIENCIES
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0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC; 429.41(1)(a)3 & 3.(i)

Based on record review and interview, the facility failed to conduct a minimum of two resident elopement prevention and response drills per year.

Findings:

The facility has been owned and licensed since .

Caregiver A was hired on . On at 1:09 p.m. she said she never participated in an elopement drill at the facility.

On at 3:30 p.m. a request was made to review the facility's documented elopement drills.

On at 4:15 p.m. the owner provided a binder that contained facility records however, it did not contain documentation to indicate the facility conducted the required elopement drills.

On at 4:45 p.m. the owner said the facility had never done a resident elopement drill.

Class III

0052 - Medication - Assistance with Self-Admin - 429.256( ); 58A-5.0185 (3)

Based on observations, record reviews and interview, the facility failed to ensure the unlicensed caregiver (owner) who assisted a resident (#5) with self-administered medications followed the correct procedure.

Findings:

Observations made during a medication pass for resident #5 on at 12:53 p.m. revealed the resident sat in a wheelchair near the medication cart. The unlicensed owner washed her , donned gloves, then she unlocked the medication cart. She removed two bottles of medication and said to the resident "this is your , medicine" and "this is to relax you." She poured the medications into a cup then handed the cup to the resident, who took the pills with water and without assistance. The owner observed him take the medications then she signed the Medication Observations Record (MOR).

The owner did not read the prescription labels aloud, as required.

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On ... at 1:05 p.m. the owner confirmed the findings.

Class III

0056 - Medication - Labeling and Orders - 58A-5.0185(7) FAC

Based on record reviews and interview, the facility failed to contact a health care provider to request revised instructions for 1 of 3 sampled residents (#4) who had a medication order to be given "as needed."

Findings:

Resident #4 was admitted to the facility on . A current 1823, dated , indicated that he required assistance with self-administered medications. The 1823 contained an order from a health care provider for 50 milligrams (mg) by twice a day as needed however, the order did not provide the circumstances under which it would be appropriate for the resident to request the medication.

The resident's record did not contain documentation to indicate the facility contacted a health care provider to request revised instructions.

On at 4:10 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure 1 of 3 staff (administrator) submitted a written statement from a health care provider documenting freedom from communicable within 30 days after beginning employment.

Findings:

The administrator was hired on . His personnel record did not contain a written statement from a

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health care provider documenting freedom from communicable , as required.

On at 4:49 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure that 3 of 3 sampled staff (A, B, and administrator) received the required in-service training within 30 days of employment.

Findings:

1. Caregiver A was hired on . Her personnel record contained a certificate of training, dated ' ," on nutrition and safe food handling however, the certificate and the dietician instructor's signature were copied and the date and name of the caregiver were -written onto the copied certificate.

On at 5 p.m. the owner confirmed the findings, said she provided caregiver A with training on nutrition and safe food handling, and she used a copy of the dietician's training certificate for proof of the training. The certificate did not contain the owner's name and credentials to assist in determining whether caregiver A did in fact receive the training.

2. Caregiver B was hired on . Her personnel record did not contain documentation to indicate she received the required training on the facility's policies and procedures on reporting resident , neglect, and and in-service training regarding the facility's resident elopement response policies and procedures. In addition, her 2-hour preservice orientation training certificate, dated , was from an online provider and the agenda did not contain resident rights and the facility's license type and services offered.

3. The administrator was hired on . His personnel record did not contain documentation to indicate he received the required training on reporting major and adverse incidents and emergency procedures including chain-of-command and staff roles relating to emergency evacuation and in-service training regarding the facility's resident elopement response policies and procedures.

On at 4:50 p.m. the owner confirmed the findings and was unable to provide additional

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documentation.

Photographic evidence obtained.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure 1 of 3 sampled staff (B) completed a one-time education course on ( ) and ( ) within 30 days of employment.

Findings:

Caregiver B was hired on . Her personnel record did not contain documentation to indicate she completed a one-time education course on and , as required.

On at 5:05 p.m. the owner confirmed the finding and was unable to provide additional documentation.

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

Based on record reviews and interview, the facility failed to ensure a staff member who held a current valid ( ) card was in the facility at all times.

Findings:

Caregiver B was hired on . Her personnel record did not contain a valid card.

Review of the facility's staffing schedule revealed that on caregiver B worked alone from 3 p.m. to 7 a.m.

On at 5:10 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure 1 of 2 unlicensed staff (A) who assisted with self-administered medications completed the initial training.

Findings:

On at 1:09 p.m. unlicensed caregiver A said she assisted residents with self-administered medications.

Caregiver A was hired on . Her personnel record contained a 4-hour certificate of training, dated , on providing assistance with self-administered medications however, the certificate did not contain credentials to indicate whether the instructor was a registered nurse or licensed pharmacist.

The record also contained a 6-hour certificate of training, dated , however, the training was specific for the agency for persons with .

On at 5:13 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(7) FAC

Based on personnel record reviews and interview, the facility failed to ensure the person designated as responsible for the facility's food service and day-to-day supervision of food service staff (owner) obtained a minimum of 2 hours continuing education annually from an approved trainer.

Findings:

On at 3:30 p.m. the owner identified herself as the person designated as responsible for the facility's food service and day-to-day supervision of food service. Her personnel record contained only one 2-hour certificate of training, dated ' ,' on nutrition and food service however, the certificate and instructor's signature were copies and the date and owner's name were written on the copied certificate.

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On . . . . . at 3:45 p.m. the owner confirmed the findings and said she used a blank copy of the dietician's certificate of training to document that she received the required training, which is falsification of a document.

Photographic evidence obtained.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure certificates of training were not altered for 2 of 3 sampled staff (A and B).

Findings:

Caregiver A was hired on . . . . . . Her personnel record contained certificates of training for resident rights, reporting major incidents, elopement procedures, and emergency procedures and evacuation however, the location of training on the certificates was another facility's name that was crossed off and this facility's name was . . . . -written on the certificates.

Caregiver B was hired on . . . . . . Her personnel record contained certificates of training for resident rights, reporting major incidents, and emergency procedures and evacuation however, the location of training on the certificates was another facility's name that was crossed off and this facility's name was . . . . -written on the certificates.

On . . . . . at 4:50 p.m. the owner confirmed the findings.

Photographic evidence obtained.

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on record reviews and interview, the facility failed to maintain all sanitation inspection reports issued by the county health department within the last 2 years.

Findings:

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On at 3:45 p.m. a request was made to review the facility's health department group home inspections.

On at 4:11 p.m. the owner provided payment receipts only and said the facility was never issued an inspection report from the health department.

Class III

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

Based on personnel record reviews and interview, the facility failed to ensure the personnel record for 2 of 3 sampled staff (administrator) contained a copy of the employment application with references furnished.

Findings:

Caregiver A was hired on . Her personnel record did not contain an employment application with references furnished for this hire date, as required.

The administrator was hired on . His personnel record did not contain references furnished, as required.

On at 4:33 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Class

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

Based on record reviews and interview, the facility failed to record a semi-annual for 1 of 2 residents (#4) who received assistance with the Activities of Daily Living (ADLs.)

Findings:

Resident #4's record revealed a facility admission date of . A current 1823 health assessment

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form, dated , indicated that he required assistance with his ADLs. His record contained recorded only on and and not semi-annually, as required.

On at 4:14 p.m. the owner confirmed the findings and said there were no additional recorded .

Class III

0163 - Records - Resident, Penalties for Alteration - 429.49 FS

Based on record reviews and interview, the facility failed to ensure a certificate of training for 1 of 4 sampled staff (owner) was not falsified.

Findings:

On at 3:30 p.m. the owner identified herself as the person designated as responsible for the facility's food service and day-to-day supervision of food service. Her personnel record contained only one 2-hour certificate of training, dated ' ,' on nutrition and food service however, the certificate and instructor's signature were copies and the date and owner's name were written on the copied certificate.

On at 3:45 p.m. the owner confirmed the findings and said she used a blank copy of the dietician's certificate of training to document that she received the required training, which is falsification of a document.

Photographic evidence obtained.

Class III

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

Based on record reviews and interviews, the facility failed to ensure 2 of 2 sampled residency agreements (#4 and #5) contained all of the required information.

Findings:

Resident #4's residency agreement was dated .

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Resident #5's residency agreement was dated .

Neither agreement contained a written refund policy, as required.

On at 4:12 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Class

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

Based on personnel record reviews, review of the Agency's background screening website and interview, the facility failed to maintain the current eligibility results of a background screening in the personnel record for 1 of 3 staff (Administrator) who was in a role that required a background screening.

Findings:

The administrator was hired on . The only background screening in his file indicated "agency review required."

Review of the Agency's background screening website on at 3:20 p.m. revealed he had an eligible screening on . Therefore, the eligible result should have been maintained in his personnel record.

On at 4:30 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Photographic evidence obtained.

Unclassified

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

Based on review of the facility's online background clearinghouse employee roster, personnel record reviews and interview, the facility failed to update the employment status for 1 of 3 sampled staff (B) within 10 business days of a change.

Findings:

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Review of the facility's staffing schedule revealed that caregiver B was scheduled to work from 7 a.m. to 3 p.m. on , , , , , and .

Review of the facility's online background clearinghouse employee roster on at 9:41 a.m. revealed caregiver B was not listed.

Review of caregiver B's personnel record did not reveal a hire date. On at 2 p.m. the owner said caregiver B was hired on . Therefore, caregiver B should have been listed on the roster.

On at 3:05 p.m. the owner confirmed the findings.

Photographic evidence obtained.

Unclassified

Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on personnel record reviews, review of the facility's online background screening clearinghouse roster, and interview the facility failed to ensure 1 of 3 staff (B) who required a background screening, did not have any disqualifying offenses.

Findings:

Review of the facility's staffing schedule revealed that caregiver B was scheduled to work from 7 a.m. to 3 p.m. on , , , , , and .

Review of the facility's online background clearinghouse employee roster on at 9:41 a.m. revealed caregiver B was not listed.

Review of caregiver B's personnel record did not reveal a hire date and the only eligible background screening result in the record, dated , was a copy obtained by another facility. On at 2 p.m. the owner said caregiver B was hired on therefore, the facility's roster should have been updated to reflect caregiver B's hire date so the facility could request its own result.

On at 3:05 p.m. the owner confirmed the findings.

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Photographic evidence obtained.

Unclassified

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

Based on personnel record reviews and interview, the facility failed to ensure 3 of 3 personnel records (A, B, and administrator) contained An Attestation of Compliance with Background Screening Requirements.

Findings:

Caregiver A was hired on .. .. ..

Caregiver B was hired on .. .. ..

The administrator was hired on .. .. ..

None of their personnel records contained an attestation of compliance with background screening requirements, as required.

On at 4:38 p.m. the owner confirmed the findings and was unable to provide additional documentation.

Unclassified