STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966877	**02/12/2019**
NAME OF PROVIDER OR SUPPLIER **ROSEMONT GARDENS, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1842 KREIDT DR** **ORLANDO, FL 32818**	

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

0000 - Initial Comments

The re-licensure survey was conducted on . Rosemont Gardens, Inc. Assisted Living Facility, License #10977 had deficiencies at the time of the visit.

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

Based on personnel record review and interview, the facility failed to ensure that 1 of 3 sampled direct care staff (C) had evidence of the completion of a one-time education course on ( ) and (Acquired -Deficiency), including the topics prescribed in the Section 381.0035, F.S. within 30 days of employment.

Findings:

Review of the personnel record for staff C a caregiver hired , revealed there was no evidence to confirm she had completed a one-time education course on and .

On at 2:30 PM, the administrator confirmed the findings.

Class III

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

Based on the fire inspection report review and interview, the facility failed to maintain an annual satisfactory fire inspection report.

Findings:

Review of facility records revealed the last fire inspection report was dated (due).

On at 10 AM, the administrator confirmed the findings.

Class III

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

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

Based on contract review and interview, the facility failed to ensure a residency contract contained all of the required information for 2 of 2 sampled residents (#1 and #2).

Findings:

Review of the contract for resident #1 dated and review of the contract for resident #2 dated , revealed their contracts did not contain a provision per 429.24(3)(a) that indicated that if after a contract was terminated, the facility intended to make a claim against a refund due the resident, the facility must notify the resident or responsible party in writing of the claim and must provide the said party a reasonable time period of no less than 14 calendar days to respond . The facility shall provide a refund to the resident or responsible party within 45 days after the transfer, discharge, or of the resident.

On at 12:30 PM, the administrator confirmed the findings.

Class

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

Based on personnel record review, background screening website and interview, the provider did not maintain the current Level II Background screening eligibility results for 2 of 3 sampled staff (B and C) in their personnel files.

Findings:

1. Personnel record review for staff B, a caregiver hired revealed the background screening documentation in her record noted "agency review required."

2. Personnel record review for staff C, a caregiver hired revealed the background screening documentation in her record noted "awaiting privacy policy."

There was no way to determine whether or not both staff had eligible background screening results when reviewing the documentation.

Review of the Agency's online background screening website on at 2 PM revealed staff B had an eligible screening result that was dated and staff C had an eligible background screening

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

result dated .

On at 2:30 PM, the administrator confirmed the findings.

Unclassified

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

Based on personnel record review and interview, the facility failed to ensure that 1 of 3 staff (C) completed the affidavit of compliance with background screening requirement form.

Findings:

Review of the agency's background screening website on at 2 PM revealed staff C, a caregiver hired had an eligible screening dated .

Personnel record review for staff C revealed there was no documentation to confirm she completed any type of affidavit or documentation attesting, subject to penalty of perjury, to meeting the requirements for qualifying for employment pursuant to chapter 435.

On . at 2 PM, the administrator confirmed the findings.

Unclassified