STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966504	02/21/2019
NAME OF PROVIDER OR SUPPLIER **OUR HOME AT BEACON HILL**	STREET ADDRESS, CITY, STATE, ZIP CODE **141 KAELYN LANE** **PORT SAINT JOE, FL 32456**	

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

0000 - Initial Comments

An unannounced complaint survey (CCR#2018016622 & CCR#2019000752) was conducted in conjunction with a biennial relicensure and Limited Nursing Services at Our Home at Beacon Hill in Port St. Joe, Florida, [redacted] through [redacted]. At the time of the survey the facility was not in compliance with the regulations for Assisted Living Facilities. Both complaints were substantiated. The citation was related to the complaint CCR#2018016622.

0165 - Risk Mgmt & QA; Adverse Incident Report - 429.23(&) FS; 58A-5.0241 FAC

Based on staff interviews and facility record reviews, the facility failed to report an adverse incident where law enforcement was contacted related to , of an elderly person within 15 days to the agency (Agency for Health Care Administration).

The findings include:

A report from the Department of Children and Families (DCF) was submitted to the Agency on 11/6/18 indicating DCF verified , of two residents by two staff members at the facility dating to .

On at 120pm an interview was conducted with the Administrator who stated they had two employees that stole money from residents and they were immediately fired. Incident 1 is when a male staff member vistited the ATM (Automated Teller Machine) on 3 occasions and withdrew money after a resident had given him her debit card and PIN (personal identification number) to purchase a microwave for her room. The family member of the resident contacted them to advise they noticed these withdrawals from the resident's account totalling near $400. There was no transaction for the purchase of the microwave, but the staff member did return to the facility with a new microwave. Incident 2 is when another male staff person borrowed $120 from a resident. This was discovered after the resident had complained to the dietary manager that she had not yet been paid . The resident stated the male staff person was working in her room when he began talking about his hard times financially and that his car was in the shop and he was unable to pay the money to get it out of the shop. The resident felt bad for him and gave him $120. The Administrator stated there is a policy specifically prohibiting employees from accepting gifts, tips or asking for loans from residents. Both staff were immediately terminated, reported to DCF and by law enforcement. The administrator stated she did not realize the incident was reportable as an adverse to AHCA and confirmed she did not submit the report.

Review of the facility policies and procedures revealed there is a specific policy that prohibits residents

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from accepting gifts, money or food from residents. This policy is provided to all staff during orientation upon hire.

Class III