STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966112	**03/05/2019**
NAME OF PROVIDER OR SUPPLIER **ORANGE BLOSSOMS VILLA**	STREET ADDRESS, CITY, STATE, ZIP CODE **10331 PIPPIN LANE** **ROYAL PALM BEACH, FL 33411**	

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

0000 - Initial Comments

An unannounced Relicensure survey was conducted on [redacted] at Orange Blossoms Villa, License #10383. The facility had deficiencies at the time of the visit.

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

Based on interview and record review, the facility failed to maintain the initial Florida Health Assessment form (form 1823) for the resident upon admission into the facility. Also, the facility failed to document on the current Resident Health Assessment form (AHCA 1823 form) that the resident is receiving hospice services, for 1 of 2 sampled resident records reviewed (Resident # 3).

The findings included:

On [redacted] a review of the medical record was conducted. It was revealed that Resident # 3 was admitted into the facility on [redacted]. The Surveyor could not locate an AHCA 1823 form (Initial Health Assessment) for this resident. A review of the 1823 form completed by the physician on [redacted] does not indicate that the resident is currently receiving hospice services. It was revealed that the resident was receiving hospice services from the census report. The review of the hospice notes reveal the resident began receiving hospice services [redacted].

On [redacted] at 03:00 PM, an interview was conducted with the Administrator. She acknowledged the findings.

Class III

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

Based on interview and record review, the facility failed to provide evidence of a negative examination on an annual basis, for 1 of 3 sampled employee personnel records reviewed (Specifically, the Administrator).

The findings included:

Review of the Administrator file on [redacted] revealed the last statement in her file for Communicable [redacted] and [redacted] were dated [redacted]. The physician statement was expired as of the date of the survey.

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On . . . . . at 03:00 PM, an interview was conducted with Administrator. She acknowledged the findings.

Class III

0080 - Training - Core & Competency Test - 429.52( ) FS; 58A-5.0191(1) FAC

Based on interview and record review, the facility failed to ensure that the Administrators and Managers participate in 12 hours of continuing education in topics related to assisted living every 2 year, for 1 of 3 employee personnel records reviewed (Specifically, the Administrator).

The findings included:

On a review of the employee personnel file for the Administrator was conducted. It revealed that the Administrator was hired on . . . . . The file failed to reveal the 12 hours of continuing education , as required. The Administrator passed the CORE exam on . She did not have any additional CORE training hours in the file.

On . . . . . at 03:00 PM, an interview was conducted with the Administrator. She acknowledged the findings.

Class III

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

Based on interview and record review, the facility failed to ensure that a preservice orientation of at least 2 hours to all new assisted living facility employees who have not completed the CORE training. The facility failed to ensure 3 hours of Activities of daily living in-service traning. The facility failed to ensure that staff receive 1 hour in-service training in the following areas: Elopement standards, Reporting Major Incidents, Reporting Adverse Incidents, Facility Emergency Procedures, Incident reporting training, Nutritional. Safe Food Handling, for 2 of 3 sampled employee personnel files reviewed. (Specifically. Staff A and Staff B).

The findings included:

On a review of the employee personnel file for Staff A was conducted. Staff A was hired on

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as a Caregiver. She provides direct resident care. It was revealed that her employee personnel file was missing the following training certificates: Preservice orientation 2 hours, Activities of Daily Living (ADL's) 3 hours, Elopement Response 1 hour, Reporting Major Incidents, Reporting Adverse Incidents, Facility emergency Procedures 1 hour, Incident reporting 1 hour, Nutrition and Safe Food Handling 1 hour.

On a review of the employee personnel file for Staff B was conducted. Staff B was hired on as a Home Health Aide, (HHA). She provides direct resident care. It was revealed that the employee personnel file was missing the following training certificates: Preservice orientation 2 hours, Incident Reporting,

On at 03:00 PM, an interview was conducted with the Administrator. She acknowledged the findings.

Class III

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

Based on interview and record review, the facility failed to ensure that all direct care staff receive at least one hour training in the facility's policies and procedures regarding ( ) for 1 of 3 sampled employee records reviewed. (Specifically, Staff A).

The findings included:

On a review of the employee personnel files was conducted. It was revealed that Staff A was hired on /2918. She provides direct care to the residents. It was revealed that the training certificate for one hour of training was missing from her employee personnel file.

On at 03:00 PM, an interview was conducted with the Administrator. She acknowledged the findings.

Class III

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

Based on interview and record review, the facility failed to ensure that a copy of the resident's contract contained all the required information for, 1 of 2 sampled resident records reviewed. (Specifically, Resident # 3).

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The findings included:

On [redacted] at 01:00 PM, a request was made for the contract portion for Resident # 3. The Administrator could not produce the contract. She could only provide the resident medical record.

On [redacted] at 03:00 PM, an interview was conducted with the Administrator. She acknowledged the findings.

Class III

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

Based on interview and record review, the facility failed to ensure that the Comprehensive Emergency Management Plan (CEMP) was submitted for approval by the local emergency management agency .

The findings included:

On [redacted], a review of the facility's CEMP was conducted. The most recent CEMP approval letter was dated [redacted]. The facility had submitted a new CEMP for approval. This plan was rejected on [redacted]. The last CEMP submitted for approval shows a receipt dated [redacted].

On [redacted] at 03:00 PM, an interview was conducted with the Administrator. She stated they were awaiting for fire inspection approval. She acknowledged the findings.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on interview and record review, the facility failed to ensure the acquisition and maintenance of a [redacted] monoxide alarm. The facility also failed to ensure within five (5) business days, to notify in writing, unless permission for electronic communication has been granted, each resident and the resident's legal representative regarding the Emergency Environmental Control Plan (EECP) for 6 of 6 Residents in the facility. (Specifically, Residents # 1- # 6).

The findings included:

On [redacted] a tour was conducted with the Administrator. She stated she had not obtained the

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monoxide detectors required in the generator plan. She further stated she had not sent out the letters to the residents or their representatives regarding their EECP.

On . . . . . at 03:00 PM, an interview was conducted with the Administrator. She acknowledged the findings.

Class III

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

Based on interview and record review, the facility failed to ensure that the signed Attestation form for the Level II Background screening results remain in the employee personnel file, for 2 of 3 employee records reviewed. (Specifically Staff A, and Staff B).

The findings included:

On . . . . . a review of the employee records was conducted. It was revealed that Staff A was hired on as a Caregiver. She provides direct resident care. She does not have a signed Attestation form in her employee personnel file.

On . . . . . a review of the employee record for Staff B was conducted. It was revealed that Staff B was hired on as a Home Health Aide (HHA). She also provides direct resident care. She did not have the signed form in the file.

On . . . . . at 03:00 PM, an interview was conducted with the Administrator. She acknowledged the findings.

Unclassified