STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964643	03/06/2019
NAME OF PROVIDER OR SUPPLIER **BISHOP CHRISTIAN HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **1627 EAST 8TH STREET** **JACKSONVILLE, FL 32206**	

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

0000 - Initial Comments

On . . . . . a complaint survey, CCR #2019002152 was conducted at Bishop Christian Home. There was deficient practice identified at the time of the investigation.

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

Based on interview and record review the facility failed to honor the rights of residents to live in a safe and decent living environment for 2 of 4 sampled residents, which has the potential to affect all current residents of the facility.

The findings include:

Record review revealed signed documentation stating that on , Employee B, a caregiver, was observed by the facility owners and other staff members via surveillance video, pushing Resident #1 to the ground.

During an interview on at 11:04am the Owner confirmed that via surveillance video she witnessed Employee B push Resident #1 to the ground. She also confirmed that Employee B was allowed to return to work following an investigation. Additionally, the Owner confirmed that since returning to work, Employee B has worked with residents unsupervised.

When asked how she came to the conclusion Employee B could return to work, she cited the fact that residents were asked and did not object to Employee B returning. When asked if the incident with Employee B qualified for termination, she said she normally would have terminated an employee for such actions, but because Employee B did not understand what she did was wrong, she gave her another opportunity. She explained that the residents all like Employee B now.

During an interview on . . . . . at 12:35pm with Resident #1, she confirmed there was a meeting in to discuss Employee B. She stated that Employee B has hit her "plenty of times", and that she did not want Employee B working at the facility. She gave examples of continued problems with Employee B, including instances where Employee B takes the phone away preventing resident use. Resident #1 also explained Employee B yells and calls the residents names.

During an interview on . . . . . at 1:13, Resident #2 confirmed Employee B gets mad and yells when they want to go outside and smoke. She stated, "she yells at everybody often." She also said Employee B is sometimes on her phone for long periods of time, not helping.

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SUMMARY STATEMENT OF DEFICIENCIES
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Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on interview and record review the facility failed to develop and implement written policies and procedures to ensure that the assisted living facility can effectively and immediately activate , operate and maintain the alternate power source and any fuel required for the operation of the alternate power source.

The findings include:

A record review on . . . . . of the facilities Emergency Power Plan revealed that there was not a written policy and procedure for the emergency power source in the record.

On . . at 10:45 am, 11:20 am, 1:00pm and 2:02pm, Employee A, the owner, failed to provide a copy of the policy and procedures for the emergency power source requested by the survey team.

During an interview on . . . . . at 2:45pm Employee A, the owner, confirmed that the facility did not have a policy and procedures for the emergency power source.

Class III