

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968469	(X3) DATE SURVEY COMPLETED 01/22/2019
NAME OF PROVIDER OR SUPPLIER TOUCH OF GRACE ASSISTED LIVING FACILITY, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 3425 SW RIVERA STREET PORT SAINT LUCIE, FL 34953	

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

0000 - Initial Comments

AMENDED

An unannounced licensure complaint survey, CCR #2018015746 was conducted at Touch of Grace Assisted Living Facility, LLC (License #12380) on The facility had deficiencies identified at the time of the survey.

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

Based on record review and interview, the facility failed to ensure that their Comprehensive Emergency Management Plan (CEMP) was up-to-date and approved by the Local County Emergency Management Division.

Findings Include:

During Complaint Survey conducted on, this surveyor requested the facility's Comprehensive Emergency Management Plan (CEMP). The Administrator stated that it had not been received yet, but it had been submitted. On, between 10:20 AM and 10:50 AM, this surveyor was provided the facility's CEMP binder. During review of such, It was observed that the binder did not contain a current CEMP approval. On between 10:35 and 10:50 AM, the Administrator provided this surveyor a copy of the facility's CEMP approval letter dated The Administrator restated that the renewal request was submitted, but not received yet.

During the exit interview with Administrator on between 2:15 PM and 2:35 PM, This surveyor discussed the findings of the survey; specifically, the CEMP and EEMP was not available. The Administrator stated, "I haven't gotten them from the County. I'll go down there and see them."

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on record review and interview, the facility failed to ensure that their Environmental Emergency Management Plan (EEMP) was up-to-date and approved by the Local County Emergency Management Division.

The findings include:

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During Complaint Survey conducted on, this surveyor requested the facility's Emergency Environment Management Plan (EEMP) approval. The Administrator stated that it had not been received yet, but it had been submitted. Between 10:20 AM and 10:50 AM, this surveyor was provided the facility's CEMP binder. During review of such, it was observed that the binder did not contain an EEMP approval. On between 10:35 and 10:50 AM, the Administrator provided this surveyor a copy of the facility's CEMP approval letter dated However there was no EEMP letter provided. The Administrator stated that she was "waiting for some thing to be done with the electrical and it should be finished." During exit interview with Administrator on between 2:15 PM and 2:35 PM, this surveyor restated to the Administrator that the Environmental Emergency Management Plan EEMP was not available. The Administrator stated, "I haven't gotten them from the County. I'll go down there and see them." Class III Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS Based on observation, record review and interview, the facility failed to ensure that three (3) of five (5) current employees were listed on the facility's Background Screening roster (Employees #3, #4 and #5). Findings Include: During Complaint Survey conducted on, this surveyor interviewed the Administrator to discuss the facility's employees and employee roster. Specifically, current employees (#3, #4 and #5) listed on the facility's staffing schedule, were not listed on the facility's Background Screening Employee Roster. The Administrator stated that she "thought she had done that." This surveyor explained that they were not listed, to which the Administrator responded: "How do I do that?" This surveyor directed the Administrator to the site with the information to assist with such. During the exit interview with the Administrator on between 2:15 PM and 2:35 PM, this surveyor restated to the Administrator that the Background Screenings Roster does not contain the names of employees #3, #4 and #5. The Administrator acknowledged the finding and stated she would		

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 04/03/2019
FORM APPROVED

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correct it. Unclassified		