STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953272	**04/04/2019**
NAME OF PROVIDER OR SUPPLIER **LAKEWOOD RETIREMENT CENTER**	STREET ADDRESS, CITY, STATE, ZIP CODE **1220 JIMMY ANN DRIVE DAYTONA BEACH, FL 32117**	

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

0000 - Initial Comments

An unannounced biennial licensure survey with emergency managment plan monitoring was conducted at Lakewood Retirement Center on , , . Deficiencies were found as a result of the survey.

0008 - Admissions - Health Assessment - 429.26( ) FS; 58A-5.0181(2) FAC

Based on record review and staff interview, the facility failed to ensure that 1 of 2 Agency for Health Care Administration Health Assessment (AHCA form 1823) were accurate and complete, Resident #7.

The findings include:

A record review was conducted for Resident #7 on . The Agency for Health Care Administration Health Assessment (form 1823) dated was reviewed and revealed her 1823 form was not complete. On page 2, Section 1, paragraph A under Activities of Daily Living each category was marked as total care for Ambulation, Bathing, , Eating, Grooming, Toileting, and Transferring. However, there were no comments noted as required. In addition, on page 2, Section 1, paragraph C, bedridden status was answered yes without any comments.

Also, on page 4, Section B of 1823, "does the individual need help with taking his or her medications (meds)" had no checkmark for yes or no and there was no checkmark to indicate if resident needed assistance with Self-Administration of medications, Needs Medication Administration or Able to Administer without assistance as required.

During an interview on at 1:46 PM with the Administrator she confirmed that Resident #7's 1823 was incomplete and the abovementioned information was not documented on the 1823 as required and stated she would have the physician correct them as soon as possible.

Photographic evidence was obtained.

Class III

0026 - Resident Care - Social & Leisure Activities - 58A-5.0182(2) FAC

Based on observation, and interview, the facility failed to post an activities calendar in the common areas where the 16 residents that reside in the facility normally congregate.

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The findings include:

During a tour of the facility on at 8:30 AM, there were not any activity posters observed. An easel was observed near the front of the dining room. Both sides of the easel were observed and both did not have anything posted. (Photographic evidence obtained).

During an interview with the Administrator on at 1:28 PM, the findings were confirmed. She stated she was aware the activity calendar for had not been posted in the facility and should have been on the easel located near the dining room.

Class III

0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC

Based on observation and interview, the facility failed to store medication in a safe manner to ensure safety of the 16 residents that reside at the facility.

The findings include:

During an observation in the main dining room of the facility on at 8:59 AM a inhaler was observed sitting on the table in front of Resident #4. Resident #4 was interviewed at the time of the observation and he stated he did not know who the inhaler belonged to. The Administrator notified of the observation and identified it was for Resident #4 and that Employee A had left the medication the table at 8:00 AM when she was giving medication because the resident had gotten up. She obtained the box for the inhaler out of the mediation cart and review of the label found it was prescribed for Resident #4. (Photographic evidence obtained)

Class III

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

Based on record review and staff interview, the facility failed to ensure 1 of 3 sampled employees (Employee B) submitted a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable . The facility also failed to ensure 2 of 3 sampled employees submitted evidence of a negative examination on an annual basis. (Employee A and the Administrator)

The findings include:

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Record review for Employee B (hired) found the most recent communicable statement in the employee record was dated . There was no other evidence found in the employee record.

Record review for Employee A (hired) and for the Administrator (hired 2005) found no evidence of a negative examination in over a year.

The findings were confirmed with the Administrator on at 12:37 PM. She was informed of the findings.
She was given the opportunity to provide the information and did not have it at time of the exit conference at 2:25 PM.

Class III

0083 - Training - First Aid and - 58A-5.0191(5) FAC

Based on record review and staff interview, the facility failed to ensure one staff member working at the facility at all times held a current certification in First Aid, Employee A and C and , , ( ), Employee C.

The findings include:

Record review of the Employee file for Employee A (hired) found no evidence she competed training in first aid. Employee A stated at 11:25 AM she took the course but did not bring the documentation to the facility.

Record review for the Administrator found she did not have any documentation in her employee file to show she had current and valid training in First Aid and .

Record review of the employee schedule for through found Employee A was scheduled to work from 7:00 to 2:00 on and . There were no other employee scheduled to work until noon and that was the Administrator. (Photographic evidence obtained)

During an interview with the Administrator on at 12:17 AM, she was asked who works at the facility at night since there was not anyone on the schedule. She stated she did not have anyone written

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on the schedule for nights as she is in the facility. She stated she comes in about an hour before the last person leaves and stays until she has two people in the facility or to the end of her shift. The Administrator was notified on at 2:23 PM there was not a valid card for or First aid in her employee record. She stated she was aware and would go take the course

Class III

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(6) FAC 429.52 (6), FS

Based on interview and record review, the facility failed to ensure that 1 of 3 sampled employees that assist with self-administration of medication received the required training. (Employee A)

The findings include:

During an observation in the main dining room of the facility on at 8:59 AM, an inhaler was observed sitting on the table in front of Resident #4. The Administrator was notified of the observation and identified it was for Resident #4 and stated Employee A had left the inhalerr on the table at 8:00 AM when she was giving medication to Resident #4. (Photographic evidence obtained)

Record review of the employee file for Employee A (hired) found she received a 2 hour course in self-administration of medication on and a 2 hour refresher course on . Record review found no evidence Employee A received the initial training or any other training for unlicensed staff assisting with self-administration of medication.

The Administrator was notified of the missing information on at 12:37 PM. She was given the opportunity to provide the information and did not have it at time of the exit conference at 2:25 PM.

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(7) FAC

Based on record review and staff interview, the facility failed to ensure the Administrator obtained annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility.

The findings include:

Record review of the employee file for the Administrator found no evidence of food service training in the

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past year.

During an interview with the Administrator on at 12:37 PM she was asked to who at the facility was responsible for food service. She stated that she was. She was asked if she had any training in the last year related to food service and she stated she did not.

Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on observation and staff interviews, the facility failed to post the menu for the day for the 16 residents that reside in the facility.

The findings include:

During a tour of the facility on at 8:30 AM, the facility menus were not observed posted in any of the resident areas of the dining room. An easel was observed near the front of the dining room. Both sides of the easel were observed and both did not have anything posted. (Photographic evidence obtained).

During a dining observation in the facility on at 9:00 AM, residents were observed being served scrambled eggs, dry cereal, and toast with jelly. The majority of the residents had coffee and water and a few also had orange juice.

Record review of the approved weekly menus provided by the Administrator found the meal for Breakfast was pineapple-grapefruit juice, dry cereal or cooked cereal, peanut butter, toast, jelly and milk.

During an interview with the Administrator on at 1:28 PM, the findings were confirmed. She stated she was aware the menu for the day had not been posted. She confirmed the facility was using week 1 of the 4 week cycle of menus and the facility had not served what was on the menu for breakfast.

Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on record review and staff interview, the facility failed to maintain written work schedules documententing 24 hour coverage for the 16 residents that reside in the facility.

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The findings include:

During an interview with the Assistant to the Administrator on at 9:50 AM, she was asked to provide the employee schedules. She stated she was still working on . She provided the schedules going several months. The schedule for the previous week was reviewed and there was no one scheduled for nights.
The findings were confirmed during an interview with the Administrator on at 12:17 PM. She confirmed the schedule did not show anyone working at night. She stated she will come to the facility about an hour before the last person that is working is supposed to leave and stays in the morning until she has two people in the facility or if she has scheduled herself until her end of shift.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on record review and interview, the facility failed to notified each resident/resident representative in writing of implementation of the emergency power plan in the assisted living facility for the sixteen residents that reside at the facility.

The findings include:

During a review of the resident and facility records on , there was no evidence the facility notified each resident/resident representative in writing of implementation of the emergency power plan.

On at 1:46 PM, an interview was conducted with the Administrator. She confirmed she did not notifiy any residents/resident representatives in writing as required.

Class III

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on record review and interview, the facility failed to ensure that 1 of 3 sampled employees currently working at the facility were listed on the facility's employee roster on the Agency for Health Care Administrations Background Screening Clearinghouse website (Employee B).

The findings include:

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A review of Employee B's level II background screening showed an eligibility determination date of . . . . The employee information list showed Employee B hire date as . . . . . .

A review of the Agency for Health Care Administration's Background Screening Clearinghouse website on at 1:25 PM revealed that the facility did not have Employee B as an employee listed under the facility employee roster.

Interview was conducted with Administrator on at 1:41 PM. After reviewing the facility roster on the Agency for Health Care Administration's Background Screening Clearinghouse website, she confirmed that Employee B was not listed on the facility roster.

Photographic evidence was obtained.

Unclassified

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

Based on record review and an interview with the Administrator, the facility failed to ensure an Attestation of Compliance with Background Screening Requirements, was obtained and kept in the employee file for 3 or 3 employees reviewed. (Employees A, B, and C)

The findings include:

Record review for Employee A (hired), Employee B (hired) and for the Administrator (hired 2005) found no evidence of an Attestation of Compliance with Background Screening Requirements, AHCA Form 3100-0008 in their employee records.

The Administrator was notified of the missing information on at the time of the record review and at 12:37 PM. She was given the opportunity to provide the information and did not have it at time of the exit conference at 2:25 PM.

Unclassified