STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964320	04/15/2019
NAME OF PROVIDER OR SUPPLIER **COUNTRY MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **2806 WEST SAM ALLEN ROAD** **PLANT CITY, FL 33565**	

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

0000 - Initial Comments

An Abbreviated Biennial Re-Licensure survey was conducted at Country Manor on . . . . Deficiencies were identified at the time of survey.

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

Based on records review and interview, the facility failed to ensure that within 30 days after beginning employment, newly hired staff provide a written statement from a health care provider documenting that the individual does not have signs or symptoms of communicable and documenting evidence of a negative screening, updated annually, for 2 of 2 staff, whose records were reviewed (Staff A and Staff B).

Findings Included:

A review of Staff A's records was conducted on . The records indicated that Staff A began employment with the facility on . Staff A's records had no statement from a health care provider that Staff A had no signs or symptoms of a communicable , nor did it contain evidence of a negative screening.

A review of Staff B's records was conducted on . The records indicated that Staff B began employment with the facility on . Staff B's records had no statement from a health care provider that Staff B had no signs or symptoms of a communicable . The statement Staff B had in the record, of a negative tuberculoses screening was dated , more than a year prior to survey.

In an interview with the Administrator at 4:00pm, the Administrator was not sure why the documents were missing from Staff A and Staff B's records, but stated the facility was behind in getting required staffing documentation.

Class III

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

Based on records review and interview, the facility failed to ensure that direct care staff were provided with in service training within 30 days of the beginning of employment, for 2 of 2 direct care staff members whose records were reviewed (Staff A and Staff B).

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Findings Included:

A review of Staff A's records was conducted on . The records indicated that Staff A was employed by the facility on . Staff A's records indicated that Staff A's job title was that of "caregiver". Staff A's records did not contain any training certificates for the following required training (within 30 days of employment): adverse incidpent reporting, the facility's elopement response policies, the facility's emergency procedures, resident rights and safe food handling practices.

A review of Staff B's records was conducted on . The records indicated that Staff B was employed by the facility on . Staff B's records indicated that Staff B's job title was that of "caregiver". Staff B's records did not contain any training certificates for the following required training (within 30 days of employment): adverse incidpent reporting, the facility's elopement response policies, the facility's emergency procedures, resident's rights and safe food handling practices.

An interview with the Administrator was conducted at 4:15pm on . The Administrator was aware of the fact that both Staff A and Staff B had not had the required training and stated they were behind with training and needed to get caught up.

Class III

0082 - Training - / - 58A-5.0191(4) FAC

Based on records review and interview, the facility failed to ensure that all facility employees providing care to residents, receive a one-time education course on / , (/), within 30 days of employment, for 1 of 2 staff whose records were reviewed (Staff A).

Findings Included:

A review of Staff A's record was conducted on . The record revealed that Staff A provided care assistance to residents and that Staff A began employment with the facility on . There was no evidence in Staff A's record of having taken an educational course on / .

In an interview with the Administrator at 4:00pm, the Administrator stated that the facility was behind on ensuring Staff A's training was up to date, and it was very likely that Staff A had not taken the / training.

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Class III

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

Based on records review and interview, the facility failed to ensure that all direct care staff, who assist residents with medication self-administration, receive training on medication assistance, and medication training updates on an annual basis, for 1 of 2 employees who assist with medication self administration, whose records were reviewed (Staff B).

Findings Included:

A review of Staff B's record was conducted on . The record showed that Staff B began employment with the facility on . Staff B's record revealed no training certificates for assisting with medication self-administration.

An interview with the Administrator at 4:15pm on , the Administrator stated that all of the care-giving staff assist residents with medications. The Administrator was not aware that Staff B did not have the required Medication Assistance training certificates in their records.

Class III

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

Based on records review and interview, the facility failed to ensure that all personnel who assist residents with meal preparation, receive 2 hours of training, with annual updates, on nutrition and safe food handling, for 3 of 3 employees whose records were reviewed (the Administrator, Staff A and Staff B).

Findings Included:

A review of the Administrator's record was conducted on . The record showed that Administrator did not have the required 2 hour training on nutrition and safe food handling, updated within the past year. Staff A and Staff B's records were also reviewed and they did not have the 2 hour training for nutrition and safe food handling either.

An interview with the Administrator, at 4:15pm on , was conducted and the Administrator stated that all caregivers at the facility, including the Administrator, prepare food for the residents on a regular basis and would all be required to take the annual 2 hour training for nutrition and safe food handling.

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The Administrator stated the facility would be arranging to have their dietician conduct this training with all of them as soon as possible.

Class III

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

Based on records review and interview, the facility failed to ensure that direct care staff received at least 1 hour of training in the facility's policy and procedures regarding ( ) within 30 days of the beginning of employment, for 2 of 2 direct care staff members whose records were reviewed (Staff A and Staff B).

Findings Included:

A review of Staff A's records was conducted on . The records indicated that Staff A was employed by the facility on . Staff A's records indicated that Staff A's job title was that of "caregiver". Staff A's records did not contain any evidence of receiving at least 1 hour of training on the facility's policy and procedures regarding .

A review of Staff B's records was conducted on . The records indicated that Staff B was employed by the facility on . Staff B's records indicated that Staff B's job title was that of "caregiver". Staff B's records did not contain any evidence of receiving at least 1 hour of training on the facility's policy and procedures regarding .

An interview with the Administrator was conducted at 4:15pm on . The Administrator was aware of the fact that both Staff A and Staff B had not had the required training and stated they were behind with training and needed to get caught up.

Class III

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

Based on observations, records review and interview, the facility failed to ensure that all regular and therapeutic diets are reviewed annually by a licensed dietician and failed to maintain a 3-day emergency food supply that can be safely stored without refrigeration including water based on current census.

Findings Included:

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A tour of the facility conducted at 1:00pm on revealed the emergency food supply contained only a few large cans of vegetables and other items, however it did not appear sufficient to feed 15 residents 3 meals a day for 3 days. Staff A, stated during the tour that the emergency supply did not seem to be sufficient.

A review of the facility's menus prepared by a registered dietician were reviewed on and were found to be outdated, marked with the date .

In an interview with the Administrator at 1:15pm, the Administrator stated they knew that the menus were out of date and that the 3 emergency food supply was not adequate.

Class III

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

Based on records review and interview, the facility failed to obtain approval for their Comprehensive Emergency Plan from the local emergency management agency.

Findings Included:

A review of the facility's Comprehensive Emergency Plan did not contain an letter from the local emergency management agency stating that the plan met the agency's approval.

The Administrator stated in an interview at 1:00pm on that they were not aware they needed to submit their comprehensive emergency plan to the local emergency management agency, and receive approval from said agency.

Class III