STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967639	**04/16/2019**
NAME OF PROVIDER OR SUPPLIER **HILL VIEW ASSISTED LIVING**	STREET ADDRESS, CITY, STATE, ZIP CODE **3854 HIGHWAY 2** **GRACEVILLE, FL 32440**	

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

0000 - Initial Comments

An unannounced licensure survey with the Comprehensive Emergency Management Plan and generator assessment was conducted at Hill View Assisted Living Facility on . At the time of survey, deficiencies were identified.

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

Based on record review and interview, the facility failed to ensure documentation for communicable statement for 2 of 5 sampled employees (B and D). The facility also failed to provide documentation for the annual examination for 3 of 5 sampled employees (B, D and E).

The findings included:

A record review was conducted of five employee's personnel files and found the following concerns:
1. Employee B was hired on as a Certified Nursing Assistant. Employee B did not have a written statement from a health care provider within 30 days after employment stating the employee was free of any signs or symptoms of communicable . The employee also did not have a examination on file.

2. Employee D was hired on as a Patient Care Technician. Employee D did not have a written statement from a health care provider within 30 days after employment stating the employee was free of any signs or symptoms of communicable . The employee also did not have a examination on file.

3. Employee E was hired on as Patient Care Technician. Employee E did not have an annual examination on file.

On at approximately 2:00pm, an interview with the Administrator was conducted. The Administrator reviewed all of the above employees' personnel files and verified that the files did not have a communicable statements (B & D) or the annual examination (B, D, & E) in the employee files.

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, staff interview, and review of the facility's Comprehensive Emergency Management Plan (CEMP), the facility failed to resubmit their CEMP after , to include the

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facility's alternate power source and how the facility will operate and maintain their alternate power source. The facility, which is licensed for 12 beds, also failed to store at least 48 hours of fuel onsite.

The findings include:

On , an observation was made at approximately 1:00pm of the facility's alternate power source. The Administrator showed surveyors two 10,000 watt generators, which was located in her barn (Photographic evidence obtained). At the time of the observation, an interview with the Administrator revealed she had not checked or put in place a process for testing the alternate power source. The Administrator stated she would have to put gas in the generators and let them run completely out of gas since the generators were portable. She stated that during the last storm she could not find gas in the city, but had to travel to the next state to find gas to operate the portable gas generators. During this interview, the Administrator reported that she would be implementing a testing of the portable generators every 6 months to sure they were operating. The Administrator had no documentation to display that the generators had been tested or operated since Hurricane Michael in . When asked how much gas she had onsite, the Administrator reported that she had three, 5 gallons can of gas onsite. She revealed that the gas was for her lawn mower, but if she needed to use it for the generators she would. The Administrator verified that she did not have enough gas onsite to operate the generator for at least 48 hours in the event that the facility's power went out. She stated that she would find one of her sons to test the generator or find some gas for the generators, even if meant traveling to the next state. The Administrator reported that she does not keep gas on for the generators because the gas becomes stale, so at the time of power outage she would find gas for the generator.

A record review of the facility's CEMP was conducted. The plan's date was difficult to decipher between " , , " and " , , ". The letter approving the plan had a date that was also difficult to decipher between, " , , " and " , , ".

On at approximately 2:15 PM, an interview was conducted with the Administrator to clarify the year the CEMP was last updated at which time the Administrator could not verify the date the plan was last submitted. The Administrator called the local county emergency management office on Speakerphone with surveyors in the room at the time of the call. The Administrator was informed by office that the last submitted plan was approved on .