STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969505	**05/01/2019**
NAME OF PROVIDER OR SUPPLIER **EXCELSIOR OMEGA # 2**	STREET ADDRESS, CITY, STATE, ZIP CODE **2731 23RD ST** **SARASOTA, FL 34234**	

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

0000 - Initial Comments

An announced initial licensure survey and emergency environmental plan was completed on . . . . at Excelsior Omega #2, an assisted living facility in Sarasota, Florida.

The following deficiencies were identified at the time of the survey:

0009 - Admissions - Admission Package - 58A-5.0181(3) FAC; 400.0078(2)

Based on record review, and interview, the facility admission packet failed to include all required information, policies and procedures as required by law and rule.

The findings included:

1. A review of the admission packet revealed the following information was not present:
a. admission, retention and discharge policy updated as of , , ;
b. House Rules;
c. complete elopement policy and procedure;
d. . . . . , neglect and . , ... policy and procedure;
e. administration and housekeeping schedule;
f. . . . . control, sanitation and universal precautions policies and procedures;
g. Third party communication and coordination policy and procedure;

2. On at 10:30 p.m., the Administrator and Consultant verified the policies and procedures were incomplete or not present.

Class III

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

Based on record review, and interview, the facility failed to ensure staff were trained on the facility's own policies and procedures for preservice orientation, control, , neglect and , , elopement response, emergency procedures for 2 (Administrator and Staff A) of 2 staff reviewed.

The findings included:

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1) Record review of the Administrator's file revealed she was hired on . There was no documentation of a preservice orientation in her file. Documentation for control, , neglect and , elopement response, and emergency procedures showed it was all from myalf.com, not from the facility's own policies and procedures.

Record review of the Staff A's file revealed she was trained on and . The documentation of the preservice orientation showed it was from myalf.com, not from the facility's own license requirements and policies and procedures.

2) On at 10:45 p.m., the Administrator and Consultant said they had always received training from myalf.com and had not been cited before. They appeared unaware of the regulatory changes from , .

Class III

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

Based on record review, and interview, the facility failed to ensure staff were trained in first aid and , , ( ) for 2 (Admininstrator and Staff A) of 2 staff reviewed.

The findings included:

1) A review of the personnel files for the Administrator, hired on , and Staff A, trained on and , failed to have first aid and training on file in their record.

2) On at 10:45 a.m., the Administrator and Consultant said they were sure the training had been completed but verified the information was not in the personnel file.

Class III

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

Based on record review, and interview, the facility failed to ensure the staff were trained in 6 hours of medication management from a registered nurse (RN) or pharmacist for 2 (Administrator and Staff A) of 2 staff reviewed.

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The findings included:

1) A review of the personnel record for the Administrator found a certificate for a 4 hour up-date without an agenda, dated . No 6 hour course or prior 4 hour course was present in the file. The 4 hour up-date would not meet the 6 hour training requirement.

A review of Staff A's file revealed a certificate for a 2 hour up-date on from myalf.com. There was no previous 4 hour or 6 hour training course in the record.

2) On at 10:45 a.m., the Administrator and Consultant verified the certificates were the only ones present in either record. Both felt sure the other documentation was present somewhere, but could not find it. The Consultant said she was sure the 4 hour course on was really a 6 hour course, but had been missed documented by the training RN.

Class III

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

Based on record review, and interview, the facility failed to ensure the person responsible for food service had a two hour course in Nutrition and Food Service from a Certified Dietary Manager, Licensed or Registered Dietician, Registered Dietary Technician or Health Department Sanitarian for 1 (Administrator) of 1 record reviewed for this training.

The findings included:

Record review of the administrator's personnel file found a 2 hour food safety course from myalf.com. This was an on-line course, not provided by dietary personnel as required.

On at 10:45 a.m., the Administrator and Consultant verified it was an on-line course.

Class III

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

Based on record review, and interview, the facility failed to ensure staff were trained on the facility's policy and procedure regarding Do Not Resuscutate Orders ( ) for 2 (Administrator and Staff A) of

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2 staff reviewed for this facility.

The findings included:

1) Record review revealed the Administrator was hired on . The only training documented in the personnel record for the Administrator was completed on (no within 30 days of hire) and was from myalf.com and therefore not trained from the facility's own policy and procedure.

Record review revealed Staff A was not technically hired, but had received training from the facility. Staff A was trained on in a 1 hour course from myalf.com. The facility's policy and procedure had not been used.

2) On at 10:30 a.m., the Administrator and Consultant verified the trainings were from an on-line course and therefore was not based on the facility's policy and procedure.

Class III

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

Based on record review, and interview, the facility failed to ensure all staff completed an application for 1 (Staff A) of 2 staff reviewed and staff did not have a freedom from communicable statement from a health care practitioner for 2 (Administrator and Staff A) of 2 staff reviewed.

The findings included:

1) Record review of Staff A file revealed Staff A received trainings on and . She completed an application but only listed 1 employer for 1 day on for 4 hours. No other employment before or after was listed. Further record review revealed no freedom from communicable statement from a health care practitioner was present for Staff A.

Record review for the Administrator, hired on revealed no freedom from communicable statement from a health care practitioner was present.

2) on at 10:45 a.m., the Administrator and Consultant felt the information should have been present in the files, but verified it was not.

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Class III

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0162 - Records - Resident - 58A-5.024(3) FAC

Based on record review and interview, the facility failed to have a record form available for use recording semiannual .

The findings included:

1) Record review revealed the facility had no form to record semiannually for each resident.

2) On at 10:00 a.m., the Administrator and Consultant could not find a form amongst the forms present at the facility.

Class III

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0167 - Resident Contracts - 58A-5.025 FAC; 429.24 FS

Based on record review, and interview, the facility failed to ensure the contract contained all language and policy and procedures required by law and rule.

The fidings include:

1) On at 10:00 a.m., the facility's contract was reviewed. The contract failed to include the following:
a. Supplies and activities;
b. Complete refund policy per 429.24(3)(a);
c. Informed concent for medications inlcuding whether not the unlicensed trained staff would be supervised by a nurse or not;
d. Religious affilication or lack thereof;
e. Beneficiary desination form.

2) On at 10:15 a.m., the Administrator and Consultant verified the information was not present in the contract.

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Class III

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0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on record review, and interview, the facility failed to ensure the emergency environmental plan (EEP) was readily available and contained a written procedure for starting the generator in an emergency.

The findings included:

1) On . . . . a review of the EEP system revealed the EEP, which had been approved on . . . ., was not available for review and therefore not readily available to staff.

2) On . . . at 10:45 p.m., the Administrator and Consultant verified the plan was not available for review. They also stated they had no written procedure to start the generator if it failed to start in an emergency. The Consultant said the approved plan was at a sister facility.

Class III

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