Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11966986	A. BUILDING: ______ B. WING ______	08/30/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LOMBARDO HOME (THE)	620 71 STREET NW BRADENTON, FL 34209

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments A re-licensure survey was conducted at Lombardo Home (Assisted Living Facility) on . Deficiencies were identified at the time of survey.	A 000		
A 083 SS=D	58A-5.0191(5) FAC Training - First Aid and (5) FIRST AID AND ( ). A staff member who has completed courses in First Aid and and holds a currently valid card documenting completion of such courses must be in the facility at all times. (a) Documentation that the staff member possess current certification that requires the student to demonstrate, in person, that he or she is able to perform and which is issued by an instructor or training provider that is approved to provide training by the American Red Cross, the American Association, the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education satisfies this requirement. (b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, Part III, F.S., shall be considered as having met the training requirements for both First Aid and C.P.R. This Statute or Rule is not met as evidenced by: The facility failed to ensure that a staff member who has completed a course in First Aide and holds a currently valid card documenting completion of First Aid training was in the facility at all times for 3 (Administrator, Staff A and Staff B) of 3 staff sampled for record review.	A 083		

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A 083	Continued From page 1 Findings included: An employee record review conducted on revealed no documentation of a currently valid card documenting completion of First Aid Training for the Administrator, Staff A or Staff B. During an interview conducted on at 11:53am, The Administrator confirmed the lack of documentation of a currently valid card documenting completion of First Aid Training for the Administrator, Staff A or Staff B. The Administrator stated "No staff has it." Class III	A 083		