STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968203	12/06/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Saint Joseph Assisted Living Facility, Inc	**7615 Barry Rd Tampa, FL 33615**

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

List of Tags Cited:

St - A - 0008 - 58a-5.0181(2) Fac - Admissions - Health Assessment S-S= D
St - A - 0032 - 58a-5.0182(8) Fac - Resident Care - Elopement Standards S-S= D
St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0082 - 58a-5.0191(3) Fac - Training - / S-S= D
St - A - 0083 - 58a-5.0191(4) Fac - Training - First Aid And S-S= D
St - A - 0084 - 58a-5.0191(5) Fac - Training - Assis Self-Admin Meds & Med Mgmt S-S= D
St - A - 0090 - 58a-5.0191(11) Fac - Training - S-S= D
St - A - 0161 - 58a-5.024(2) Fac - Records - Staff S-S= D
St - A - 0167 - 58a-5.025(1) Fac - Resident Contracts S-S= D

Specific Tag Findings:

0000-Initial Comments

Assisted Living Facility

A biennial state licensure survey was conducted on .

The Saint Joseph Assisted Living Facility, Inc. had deficiencies at the time of the visit.

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

Based on record review and interview, the health assessment for one of two residents sampled was incomplete (#1).

Findings include:

A review of resident records revealed that the medical examination for Resident #1 (admitted to the facility) did not:
a) include an evaluation of whether this individual required any assistance with medication administration;
b) the date of the assessment and
c) the name, signature, address, phone number and license number of the examining licensed health care provider.

Interview with the administrator at approximately 11:30am on confirmed that Resident #1's health evaluation was incomplete, and that the missing part had not yet been obtained.

Class III

0032-Resident Care - Elopement Standards 58A-5.0182(8) FAC

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Based on record review and interview, the facility had not conducted any resident elopement drills over the past two (2) years.

Findings include:

Although administrative documentation review found a facility policy and procedure pertaining to elopement/missing residents, further review of relevant paperwork revealed no evidence that any practical elopement drills had been conducted. In an interview with the administrator at approximately 10:15am on , he indicated that during his tenure as administrator since , and throughout his experience with the facility from approximately , he didn't believe the facility had completed any elopement drills.

Class III

0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC

Based on observation, one of one staff member observed (B) did not adhere to the fundamental medication self-administration process with respect to two of two residents sampled (#1; 2).

Findings include:

At approximately 12:30pm on , Staff B was observed placing Resident #1's noon time medications in a small plastic cup, setting this container beside Resident #1/her food items during the lunch meal while the resident was still eating, and then walking away. Staff B was then observed doing the same thing for Resident #2 at approximately 12:35pm--again walking away to tend to other business at the conclusion. When asked at approximately 1:00pm on how the staff person knows whether or not the resident has consumed the medication, the administrator stated "once he/she sees that the cup is empty, they will know the resident has taken the medication." Hence, the need to focus on the medication self-administration process, as handled by the facility, was underscored.

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC

Based on record review and interview, three of three staff sampled (A, B, and C) who had been employed at least 30 days had not received all required training.

Findings include:

A personnel record review during the survey revealed that Staff C (hired) had no documentation verifying he/she had received the following: a) the 3 hour training in providing assistance with ADLs and resident

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behavior and needs; b) the 1 hour in-service training regarding the reporting of major and adverse incidents and facility emergency procedures including chain of command/staff roles relating to emergency evacuation; c) the 1 hour training related to resident rights in an assisted living facility; and d) recognizing and reporting resident , neglect, and .

Further review of the files found that neither Staff A nor B (hired and / , respectively) in addition to Staff C , had any documented evidence of having received a 1 hour in-service training in control, including universal precautions, before working with residents. Finally, neither Staff B nor C had any documentation confirming that they had received formal training regarding the facility's resident elopement response policies and procedures. Interview with the administrator at approximately 1:30pm on verified that the staff identified were all missing the required training.

Class III

0082-Training - / 58A-5.0191(3) FAC

Based on record review and interview, three of three staff sampled (A, B, and C) had not received the required / training.

Findings include:

A review of personnel files during the survey revealed that Staff A (hired), Staff B (hired), and Staff C (hired) had no documented evidence verifying that they had received training in / . In an interview with the administrator at approximately 1:10pm on , he explained that none of these staff members had taken / .

Class III

0083-Training - First Aid and 58A-5.0191(4) FAC

Based on record review and interview, one of three staff sampled (C) who was scheduled to be in the facility alone was not trained in First Aid and .

Findings include:

A review of the facility's current staff schedule found Staff C scheduled for the night shift alone. A review of this individual's personnel file found no First Aid or certificate. In an interview with the administrator at approximately 11:50pm on , he could provide no explanation.

Class III

0084-Training - Assis Self-Admin Meds & Med Mgmt 58A-5.0191(5) FAC

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Based on record review and interview, three of three staff sampled who assisted residents with their medication self-administration (A, B, and C) had not received the 2 hour continuing education update in safe medication practices/related topics on an annual basis.

Findings include:

A review of personnel records during the survey revealed that Staff A had taken the 4 hour training in providing assistance with medication self-administration in an assisted living facility , while Staff B and C both received this training / . Further review of these files found that although Staff A received a 2 hour update training / , no subsequent medication-related seminar had been taken; no documented evidence of any subsequent training in safe medication practices/related topics could be located for either Staff B or C. Interview with the administrator at approximately 1pm on verified that none of the identified trainings had been taken/received.

Class III

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

Based on record review and interview, two of three staff sampled (B; C) who had been employed at least 30 days had not received at least 1 hour training regarding the facility's policies and procedures related to .

Findings include:

A review of personnel files during the survey revealed that Staff B and C, hired / and , respectively, had no documentation attesting to the fact that they had been officially trained regarding the facility's policies and procedures with respect to . Interview with the administrator at approximately 1:05pm on verified that this formal training had not been provided.

Class III

0161-Records - Staff 58A-5.024(2) FAC

Based on record review and interview, the personnel record for one of three staff sampled (C) did not contain verification of freedom from communicable including ( ).

Findings include:

A review of personnel files during the survey indicated that the employee record for Staff C found no statement from a health care provider (physician; physician's assistant; ARNP) attesting to this individual's freedom from communicable , including . In an interview with the administrator at approximately 1:20pm on , no explanation why this documentation was not obtained could be provided.

Class III

0167-Resident Contracts 58A-5.025(1) FAC

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Based on record review and interview, the resident contracts for two of two residents sampled (#1; 2) had refund policies which did not conform to Section 429.24(3), F.S.

Findings include:

A review of the contract for Residents #1 and 2 found a document with a refund policy that did not address the following requirement: "If the resident dies or is discharged due to medical reasons, including mental health, the termination notice requirement is waived. Any refunds due are prorated."
Interview with the administrator at approximately 11:20 a.m. on verified that this verbiage was missing from the residency agreement.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Saint Joseph Assisted Living Facility, Inc.
7615 Barry Rd
Tampa, FL 33615

Dear Administrator:

This letter reports the findings of a biennial state licensure survey that was conducted on , 2013, by representative(s) of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under **Health Facilities and Providers** on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor(s). Should you have any questions please call **Paul Brown**, HFES, at 727-552-2000.

Sincerely,

For Patricia Reid Caufman
Field Office Manager

PRC/kpr

Enclosure: State (5000-3547) Form

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