

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11965336	(X3) DATE SURVEY COMPLETED
NAME OF PROVIDER OR SUPPLIER Ashford Court Assisted Living	STREET ADDRESS, CITY, STATE, ZIP CODE 1700 The Greens Way Jacksonville Beach, FL 32250	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0000 - Initial Comments
 St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
 St - A - 0081 - 58a-5.019(2) Fac - Training - Staff In-Service S-S= D
 St - A - 0082 - 58a-5.019(3) Fac - Training - S-S= D
 St - A - 0083 - 58a-5.019(4) Fac - Training - First Aid And S-S= D
 St - A - 0086 - 58a-5.019(9) Fac - Training - Adrd S-S= D
 St - A - 0090 - 58a-5.019(11) Fac - Training - S-S= D
 St - A - 0091 - 58a-5.019(12) Fac - Training - Documentation & Monitoring S-S= D
 St - A - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards S-S= D

Specific Tag Findings:

0000-Initial Comments

An unannounced biennial re-licensure survey was conducted at Ashford Court in Jacksonville Beach, Florida, on , 2014. Deficiencies were identified as a result of the survey.

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

Based on record review and staff interview, the facility failed to ensure that within 30 days of hire, a staff member submitted a statement from a health care provider documenting that the staff member was free from communicable , including (), and that freedom from was documented annually for 4 of 4 sampled employees. (Employees A, B, C and D)

The findings include:

A review of the personnel files for Employees A, B, C and D revealed that Employee A was hired on , Employee B was hired on , Employee C was hired on , and Employee D was hired on . There was no documentation of freedom from communicable in any of the four sampled employee files, and there was no documentation of testing for Employees A, B, and C. Employee D's test was current.

An interview with the administrator on at approximately 2:00 PM confirmed that the freedom from communicable statement was missing from all four employee files as well as the documentation of freedom from for Employees A, B and C. The administrator stated that they were currently working on this issue, and that it would be corrected right away.

Class III

0081-Training - Staff In-Service 58A-5.019(2) FAC

Based on record review and staff interview, the facility failed to maintain appropriate documentation of the completion of required staff education for 3 of 4 sampled employees. (Employees A, B and C)

The findings include:

A review of the personnel files for Employees B and C revealed that the certificates related to training in

AGENCY FOR HEALTH CARE
ADMINISTRATION

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activities of daily living (ADLs) and behavioral needs, control, incident reporting, elopement response, emergency preparedness and evacuation, resident rights, recording/reporting, neglect and nutrition and safe food handling were not available for review.

A review of the personnel file for Employee A revealed that the certificate related to training in nutrition and safe food handling was not available for review.

A review of the employee personnel files for Employees A, B and C revealed the following dates of hire:
Employee A -
Employee B -
Employee C -

An interview with the administrator on at approximately 2:00 PM revealed that the administrator was aware of the missing training documentation. She stated that the facility was currently working on getting all employees the required education and training.

Class III

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

Based on record review and staff interview, the facility failed to ensure that employees completed a one-time education course on and within 30 days of employment for 3 of 4 sampled employees. (Employees B, C and D)

The findings include:

A review of the employee personnel files revealed that the certificates related to training for Employees B (Date of hire), C (Date of hire) and D were not available for review.

An interview with the administrator on at approximately 2:00 PM revealed that she was aware of the missing education/training, and she stated that the facility was currently working on bringing all employee education current.

Class III

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

Based on record review and staff interview, the facility failed to ensure that a staff member who completed courses in First Aid and () and held a currently valid card documenting completion of such courses was in the facility at all times. Four of four sampled employees had no or First Aid training. (Employees A, B, C and D)

The findings include:

A review of the personnel files for Employees A, B, C and D revealed no current documentation of completion of first aid training or () training for any of the four employees.

An interview with Employee E on at approximately 12:25 PM revealed that she had no employees

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assigned to the overnight shift who were currently trained in _____ and First Aid. She stated that training was scheduled, and that all direct-care staff would be trained in _____ and First Aid.

Class III

0086-Training - ADRD 58A-5.0191(9) FAC

Based on observation, record review and staff interview, the facility failed to ensure that facility staff who had regular contact with or who provided direct care to residents with _____ and related (ARD) obtained four hours of initial training (Level I) within 3 months of employment for 3 of 4 sampled employees. (Employees B, C and D) The facility also failed to ensure that facility staff who had regular contact with or who provided direct care to residents with ADRD obtained four hours of additional training (Level II) within 9 months of employment for 1 of 4 sampled employees. (Employee A)

The findings include:

A facility tour was conducted at approximately 9:20 AM on _____ during the biennial re-licensure survey. At the time of the tour, a locked memory care unit was observed on the first floor of the facility.

A _____ review of the personnel files for Employees A, B, C and D revealed the following dates of hire:

Employee A - _____
Employee B - _____
Employee C - _____
Employee D - 1/ _____

Further review of the personnel files for Employees A, B, C and D on _____ revealed that Employees B, C and D had no documentation of completion of the initial 4 hours of required training (Level I) in their files. Employee A had no documentation of completion of the additional 4-hour required training (Level II) in her file.

An interview with the administrator on _____ at approximately 2:00 PM revealed that she was aware of the missing education/training, and she stated that the facility was currently working on bringing all employee education current.

Class III

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

Based on record review and staff interview, the facility failed to maintain documentation of the completion of training in the facility's policies and procedures regarding _____ (_____) for 2 of 4 sampled employees. (Employees B and C)

The findings include:

A _____ review of the employee personnel files revealed that the certificates related to _____ training for Employees B (Date of hire _____) and C (Date of hire _____) were not available for review.

An interview with the administrator on _____ at approximately 2:00 PM revealed that she was aware of the missing education/training, and she stated that the facility was currently working on bringing all employee

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education current.

Class III

0091-Training - Documentation & Monitoring 58A-5.0191(12) FAC

Based on record review and staff interview, the facility failed to ensure that certificates of required employee training included the number of hours of the training program for 1 of 4 sampled employee files. (Employee A)

The findings include:

A review of the personnel file for Employee A on _____ revealed that required training certificates were missing the number of training hours provided as follows:

Employee A was missing the number of training hours provided on the following certificates:
activities of daily living (ADL's) and behavioral needs training, _____ training, _____ control, elopement response training, emergency procedures and evacuation, reporting adverse incidents, resident rights, recognizing and reporting _____, neglect and _____, and _____ (_____) policy and procedure training.

An interview with the administrator on _____ at approximately 2:00 PM confirmed that the number of training hours were missing from the certificates. She stated that she would ensure that the matter was addressed promptly.

Class III

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

Based on observation and interview with the dining manager the facility failed to have on hand, a 3-day supply of nonperishable food, based on the number of weekly meals the facility has contracted with residents to serve.

The findings include:

On _____ at 12:15 p.m. a tour of the food storage area showed there was insufficient food to feed the residents for three (3) days in case of an emergency. On observation and based on statement of the dining manager there was no emergency water and not enough food for approximately two days for meal preparation. The food storage unit had minimal can goods and cooking items to last in case of emergency.

On _____ at 12:16 pm the dining director and her mentor/trainer confirmed that they did not have a 3 day supply of food and water and reported that they will have to order the 3-day supply of nonperishable food and water.

Class III



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

-----, 2014

Administrator
Ashford Court Assisted Living
1700 The Greens Way
Jacksonville Beach, FL 32250

Dear Administrator:

This letter reports the findings of a state biennial licensure survey that was conducted on -----, 2014 by representatives 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 after -----, 2014 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 surveyors. Should you have any questions please call this office at -----4201.

Sincerely,

Jana Meyering, QIDP
Health Facility Evaluator Supervisor
Division of Health Quality Assurance

JG/JM/sm
Enclosure

