RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
The Willows at Wildwood
4725 Bellwether Lane
Oxford, FL 34484

RE: CCR #2015012002

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2016 by a representative of this office.

Enclosed 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. **Please attach a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents to the Field Office no later than , 2016.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiencies identified on your survey, which may include a desk review or onsite revisit.

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. Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Charles Boyd for

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

Alachua Field Office
14101 N W Hwy 441, Suite 800
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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968749	01/29/2016
NAME OF PROVIDER OR SUPPLIER **THE WILLOWS AT WILDWOOD**	STREET ADDRESS, CITY, STATE, ZIP CODE **4725 BELLWETHER LN** **OXFORD, FL 34484**	

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

0000 Initial Comments

A complaint investigation (CCR2015012002) was conducted at The Willows at Wildwood on 29, 2016. The Willows at Wildwood had deficiencies at the time of the investigation.

0008 Admissions - Health Assessment

Based on record review and interview, the facility failed to obtain omitted information on the Resident Health Assessment (AHCA Form 1823) for 2 of 3 sampled residents (Resident #1 and #4).
Findings include:
A record review of the Resident Health Assessment (AHCA Form 1823) for Resident #1 revealed omitted information in the following areas: Page 1, Sections: or behavioral status and Special precautions; Page 2, Section 1, Part A: Comments to explain extent and type of supervision/assistance needed; and Page 4, Section 2, Part B: " Does the individual need help with taking his/her medications? " is blank.
A record review of the Resident Health Assessment (AHCA Form 1823) for Resident #4 revealed omitted information in the following areas: Page 1: Height and Weight; Page 2, Section 1, Part A: Comments to explain extent and type of supervision/assistance needed; and Page 4, Section 2, Part B: " Does the individual need help with taking his/her medications? " is blank.
An interview was conducted with the Health and Wellness Nurse on / at 4:45 PM. She confirmed there was omitted information on the Resident Health Assessment (AHCA Form 1823) for Resident #1 and Resident #4.
Class III

0052 Medication - Assistance with Self-Admin

Based on observation and interview, the facility failed to properly assist with self-administration of medications for 2 of 2 residents sampled (Resident #1 and #3).

Findings include:

An observation of medication assistance for Resident #1 was conducted on / at 1:02 PM. Staff B was observed unlocking medication cart, pulling out medication cards, popped pills out of medication bubble package into a medication cup, and handed the medication cup to Resident #1. Staff B was observed to record assistance with medication administration on Medication Observation Record. Staff B was not observed to show the medication or read the label to Resident #1.

An observation of medication assistance for Resident #1 was conducted on / at 1:05 PM. Staff

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B was observed to open the drawer of the medication cart and take out medication, put on a pair of gloves and said to Resident #1 " I am going to put this in your eye. " Staff B then handed Resident #1 a tissue. Staff B was then approached by another resident who was looking for the . She took the resident by the hand, still wearing the gloves used to instill eye drops in Resident #1's eyes and led the resident over to another staff member. Staff B was observed to record assistance with medication administration on Medication Observation Record. Staff B was not observed to wash her hands before putting on gloves, reading the label of the medication to the resident, or taking her gloves off and washing her hands before contact with another resident.

An interview conducted with Med Tech (Staff B) on / at 1:32 PM. She stated that she has been trained in medication assistance. She stated she has been a med tech for 6 months. She confirmed that she did not read the labels of the medication to Resident #1. She confirmed she did not take off gloves and took another resident by the hand to take him to another staff member. She stated she should have done the eye drops first.

2. An observation of medication assistance for Resident #3 was conducted on / at 1:26 PM. Staff B was observed to open the drawer of the medication cart and take out medication. She was heard to say to Resident #3 "You have and eye drops today. " Staff B was observed to pop the medication out of the bubble package into a medication cup, hand the medication cup to Resident #3 along with a glass of water. Resident #3 asked what it was and Staff B stated it is . Staff B was observed to record assistance with medication administration on Medication Observation Record. Staff B was not observed to show or read the medication label to Resident #3.

An observation of medication assistance for Resident #3 was conducted on / at 1:28 PM. Staff B was observed to open the drawer of the medication cart and take out medication. Staff B was observed to put on gloves, open medication container, shake medication, uncap medication and instill one drop in each eye of Resident #3. Staff B was observed to recap medication, return it to the container and remove her gloves. Staff B was observed to record assistance with medication administration on Medication Observation Record. Staff B was not observed to show and read the label of the medication to Resident #3. Staff B was not observed to wash her hands before putting on gloves.

An interview was conducted with Staff B on / at 1:32 PM. She confirmed she did not read or show the label of the medication to Resident #3. She confirmed she did not wash her hands before putting on gloves for the eye drops and stated she should have done the eye drops first.

Class III

0055 Medication - Storage and Disposal

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Based on observation, interview and record review, the facility failed to dispose of abandoned medications within 30 days for 1 of 3 residents sampled (Resident #7).
Findings include:
A review of the Admission/Discharge log revealed Resident #7's date of discharge was / /
An inventory of medications for Resident #7 was conducted on / at 11:50 AM. The following medications were observed stored in the locked medication cupboard in a locked medication storage : tab 60 mg, count: 1; Omega-3 1000 mg, count: 1; 5 mg, count: 1; 5 mg, count: 1; One-A-Day Women's Advantage, count: 1; Apir-low 81 mg, count: 1; 4 mg ER, count: 1; and 10 mg, count: 1.
An interview was conducted with Karen Browning, Licensed Practical Nurse (LPN), on / at 11:59 AM. She stated the family has not come in to pick up the medication for Resident #7. She confirmed Resident #7's medication was still in the facility.
A review of the facility policy entitled: "Medication & Treatment - Medication Disposal for Unused Controlled and Non-Controlled Medications-CS-40-6" dated / revealed "Medication disposal should follow federal and state laws for all unused controlled and non-controlled medications."
Class III

0081 Training - Staff In-Service

Based on interview and record review, the facility failed to provide the required staff in-service training for 1 of 3 staff members sampled (Staff C).
Findings include:
An interview was conducted with Staff C on / at 1:54 PM. She stated she started employment when the facility opened last 2015. She stated she helps with resident care when her help is needed.
A review of the training record for Staff C revealed no evidence of training in Control, Activities of Daily Living and Behavioral Needs, Elopement Response, Emergency Preparedness and Evacuation, Incident Reporting, Resident Rights, Recognizing and Reporting /Neglect/ and Nutritional and Safe Food Handling.
An interview was conducted with the Executive Director on / at 6:42 PM. She confirmed Staff C's date of employment was , 2015. She confirmed there was no evidence of the required Staff In-service training for Staff C.
Class III

0082 Training - /

Based on interview and record review, the facility failed to provide the required / (/) training for 1 of 3 staff

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sampled (Staff C).
An interview was conducted with Staff C on / at 1:54 PM. She stated she started employment when the facility opened last 2015. She stated that she helps with resident care when her help is needed.
A review of the training record for Staff C revealed no evidence of (/) training.
An interview was conducted with the Executive Director on / at 6:42 PM. She confirmed Staff C's date of employment was , 2015. She confirmed there was no evidence of / training for Staff C.
Class III

0086 Trainina - ADRD

Based on interview and record review, the facility failed to provide the required and Related (ADRD) Training for 1 of 3 staff sampled (Staff C).
Findings include:
An observation was conducted on / at 9:00 AM, during the tour of the facility, that the facility contains a secured memory care unit.
An interview was conducted with Staff C on / at 1:54 PM. She stated she started employment when the facility opened last 2015. She stated that she helps with resident care when her help is needed.
A review of the training record for Staff C revealed no evidence of 's Level I training.
An interview was conducted with the Executive Director on / at 6:42 PM. She confirmed Staff C's date of employment was , 2015. She confirmed there was no evidence of Level I training for Staff C.
Class III

0090 Trainina -

Based interview and record review, the facility failed to ensure that 2 of 3 sampled staff (Staff B and C) received Policy and Procedure Training.
Findings include:
A review of the training records for Staff B and C revealed no evidence of Policy and Procedure Training.
An interview was conducted with Staff C on / at 1:54 PM. She stated she started employment when the facility opened last 2015. She stated that she helps with resident care when her help is needed.
An interview was conducted with the Executive Director on / at 6:42 PM. She confirmed Staff B's date of employment was , 2015. She confirmed there was no evidence of

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Policy and Procedure Training for Staff B and Staff C.
Class III

0152 Phvsical Plant - Safe Living Environ/Other

Based on observation and interview, the facility failed to ensure that 1 of 1 laundry observed (1st floor laundry), was sufficiently clean, free of insects and clutter.
Findings include:
A tour of the facility laundry the first floor was conducted on / at 9:15 AM. The observed to have one commercial size washer on one side and a dryer and counters for folding on the other side. The floor on the washer side had a brown water stain on it. The dryer was noted to have clean linen in it. The counters for folding were covered with equipment: barrel liners, flies, vacuum hoses, boxes of supplies, carpet cleaner attachments, floor dryer, clean linen and screws (Photographic evidence obtained).
An interview was conducted with Staff C on / at 9:20 AM. She stated that the linen in the dryer is for the resident beds. She stated that it is folded on those counters (She pointed to the counter with clean linen on it with equipment and maintenance supplies on it). She stated that the laundry cleaned once a week.
An interview was conducted with the Health and Wellness Nurse on / at 9:22 AM. She confirmed the linens on the counter were clean and for resident beds. She confirmed that the counter had maintenance supplies (screws) and housekeeping supplies. She also confirmed that the counter and floor had flies on them.
Class III