STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910033	05/13/2016
NAME OF PROVIDER OR SUPPLIER **JOHN KNOX VILLAGE OF TAMPA BAY**	STREET ADDRESS, CITY, STATE, ZIP CODE **4100 E. FLETCHER AVENUE TAMPA, FL 33613**	

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

0000 Initial Comments

Assisted Living Facility

An unannounced Biennial state licensure survey with Limited Nursing Services (LNS) was conducted on . John Knox Village of Tampa Bay, Assisted Living Facility, had deficiencies at the time of this visit.

0081 Training - Staff In-Service

Based on record review and interview, the facility failed to ensure that all staff who provides direct care to residents receive receives a copy of the facility's resident elopement response policies and procedures, receives in-service training regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment, and demonstrates an understanding and competency in the implementation of the elopement response policies and procedures; a minimum of 1 hour in-service training within 30 days of employment that covers the facility ' s emergency procedures including chain-of-command and staff roles relating to emergency evacuation; and a minimum of 1 hour in-service training within 30 days of employment that covers reporting major and adverse incidents. The facility also failed to ensure that all facility staff who have not attended CORE training receive a minimum of 1 hour in-service training within 30 days of employment that covers Resident Rights in an Assisted Living Facility and Recognizing and Reporting resident , neglect, and .

Findings included:

Per observation, record reviews, and interviews conducted at the facility on , the facility employs Certified Nursing Assistants and Licensed Nurses who provide direct care to residents (current facility in-house census: 116 residents). Staff A is a Certified Nursing Assistant who began facility employment on and works 1st & 2nd shifts; Staff B is a Certified Nursing Assistant who began facility employment on and works 2nd shift; Staff C is a Certified Nursing Assistant who began facility employment on and works 3rd shift.
Per employee record reviews, there was no documentation of required staff in-service training as follows:
Staff A elopement listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 25 topics covered ; Staff B elopement listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 26 topics covered and unsigned copy of policies and procedures in file; Staff C elopement listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 25 topics covered and copy of policies and procedures signed . There are no certificates documenting training as required in Staff A, B & C records.

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Staff A Emergency Management Policy listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 25 topics covered ; Staff B Emergency Management Policy listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 26 topics covered / / ; Staff C Emergency Management Policy listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 25 topics covered . Staff A, B & C records contained no documentation of training in facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation as required.
Staff A Reporting major incidents and adverse incidents is listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 25 topics covered ; Staff B Reporting major incidents and adverse incidents is listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 26 topics covered ; Staff C Reporting major incidents and adverse incidents is listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 25 topics covered .
Staff A, B & C records contained no documentation of a minimum of 1 hour in-service training within 30 days of employment that covers reporting major and adverse incidents.
Staff A Residents Rights, /Neglect are listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 25 topics covered ; Staff B Residents Rights, /Neglect are listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 26 topics covered and staff initialed as completed mandatory computer module (no time or other info provided); Staff C Residents Rights, /Neglect are listed on New Hire Orientation Agenda & Orientation completion certificate as 1 of 25 topics covered . Staff A, B & C records contained no documentation of a minimum of 1 hour in-service training within 30 days of employment that covers Resident Rights in an Assisted Living Facility and Recognizing and Reporting resident , neglect, and .
Per interview conducted with the Administrator on at 2:30pm, the Administrator stated that the facility used to maintain required training certificates at the facility, but all employee records are now maintained by Bay Care Human Resources.

Class III

0091 Training - Documentation & Monitoring

Based on record review and interview, the facility failed to ensure that required training certificates are documented in the facility's personnel files and include title and subject matter/agenda of the training, trainee's name, dates of participation, location of the training, number of hours of the training, and training provider's name, dated signature and credentials, including professional license number, if applicable, in 3 of 3 records reviewed.

Findings included:

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Per observation, record reviews, and interviews conducted at the facility on , the facility employs Certified Nursing Assistants and Licensed Nurses who provide direct care to residents (current facility in-house census: 116 residents). Three employee records were randomly selected for review on beginning at 10:30am: Staff A is a Certified Nursing Assistant who began facility employment on and works 1st & 2nd shifts; Staff B is a Certified Nursing Assistant who began facility employment on and works 2nd shift; Staff C is a Certified Nursing Assistant who began facility employment on and works 3rd shift.
Per employee record reviews, there were no training certificates, or copies of certificates, of any required training in the facility's personnel files: Staff A 25 training topics are listed on New Hire Orientation Agenda & Orientation completion certificate dated ; Staff B 26 training topics are listed on New Hire Orientation Agenda & Orientation completion certificate dated ; Staff C 25 training topics are listed on New Hire Orientation Agenda & Orientation completion certificate dated . Topics listed on the New Hire Orientation Agenda are signed & dated by the staff person only. There were no certificates documenting training as required.
Per interview conducted with the Administrator on at 2:30pm, the Administrator stated that the facility used to maintain required training certificates at the facility, but all employee records are now maintained by Bay Care Human Resources.

Class III

Z813 Results of Screening & Notification in File

Based on record review and interview, the facility failed to maintain eligibility results of employee Background Screening and the signed Attestation of Compliance in employees ' personnel files for 5 of 5 employees reviewed providing services for 116 current in-house residents.

Findings included:

On , Surveyor requested AHCA Background Screening results for 5 employees of John Knox Village of Tampa Bay, specifically for the Administrator, a Registered Nurse, and 3 Certified Nursing Assistants. Per interview with the Administrator on , personnel files are maintained offsite by Bay Care and the Administrator does not have access to those files.
Per Surveyor review of the facility ' s employee list & staffing schedules provided by the Administrator on : Staff A is a Certified Nursing Assistant, hired , and works 1st & 2nd shifts; Staff B is a Certified Nursing Assistant, hired , and works 2nd shift; Staff C is a Certified Nursing Assistant, hired , and works 3rd shift; Staff D is a Registered Nurse, hired , and works 1st & 2nd shifts; the Administrator was hired on per facility ' s employee list.

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On , offsite personnel provided the 5 requested employee Background Screening Results printed from the AHCA Background Screening website on , all with Provider Name: " St Josephs Hospital. " All AHCA Background Screening Results (5 provided) state: " The employer must retain a hard copy of this result in the individual ' s employee file. " None of the eligibility results were in employee records, none listed John Knox Village as employer, and no Attestations of Compliance were completed as required.

Unclassed

Z814 Background Screening Clearinghouse

Based on observation, record review, and interview, the facility failed to maintain the employment status of all employees within the Agency for Health Care Administration (AHCA) Background Screening Clearinghouse, including Initial employment status and any changes in status within 10 business days, for 70 of 70 facility employees providing services for a current census of 116 in-house residents.

Findings included:

Per Surveyor review of the facility employee roster on the AHCA Background Screening Clearinghouse website on , the employee roster contains no entries--no facility employees are listed. Per Surveyor review of the facility ' s employee list provided by the Administrator on , the facility has 70 current employees. Per Surveyor review of the facility ' s staffing schedule provided by the Administrator on , 68 employees are scheduled to provide direct resident care services.
On , Surveyor requested AHCA Background Screening results for 5 employees of John Knox Village of Tampa Bay. Per interview with the Administrator on , personnel files are maintained offsite by Bay Care and the Administrator does not have access to those files.
A Bay Care HR Team Resources personnel stated on telephone with the Administrator on at 11:15am: " It is a password issue. I couldn ' t get on John Knox Village so I have just been using Bay Care. AHCA is aware of the password issue. I have been trying since end of , beginning <2015>. "
On , the Bay Care HR Team Resources personnel provided the 5 requested employee Background Screening Results printed from the AHCA Background Screening website on , all with Provider Name: " St Joseph ' s Hospital. " Two of the 5 records listed St Joseph ' s Hospital in Employment History with hire date same as listed on the facility ' s (John Knox Village) employee list; 2 of the 5 records listed position (Employee or Contracted Staff Person) with hire date same as listed on the facility ' s (John Knox Village) employee list, but no Employer indicated; 1 of the 5 records stated " No records to display " under Employment History. None of the 5 eligibility results provided indicated the current John Knox Village Assisted Living Facility employment.

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Per interview with the Administrator on at 2:15pm, the Bay Care HR Team Resources personnel maintains all AHCA Level II Background Screenings.

Unclassed

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
John Knox Village of Tampa Bay
4100 E. Fletcher Avenue
Tampa, FL 33613

Dear Administrator:

This letter reports the findings of a biennial state licensure survey with limited nursing services (LNS) that was conducted on , 2016, 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. **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.

St. Petersburg Field Office
525 Mirror Lake Drive North, Suite 410 A
St. Petersburg, FL 33701
Phone:(727) 552-2000; Fax:(727) 552-1162
AHCA.MyFlorida.com

Facebook.com/ACHAFlorida
Youtube.com/AHCAFlorida
Twitter.com/AHCA_FL
SlideShare.net/AHCAFlorida

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,

Patricia Reid Caufman
Field Office Manager

PRC/kpr

Enclosure: State Form (5000-3547)

XG90