STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968808	05/31/2017
NAME OF PROVIDER OR SUPPLIER **HARMONY CARE HOME II**	STREET ADDRESS, CITY, STATE, ZIP CODE **372 SW TODD AVENUE** **PORT SAINT LUCIE, FL 34983**	

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

0000 - Initial Comments

An unannounced Re-Licensure survey was conducted on , , 2017 at Harmony Care Home II, License #12687. The facility had deficiencies at the time of the visit.

0008 - Admissions - Health Assessment - 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on record review and an interview, the facility failed to ensure the health assessment (ACHA Form 1823) was completed for 1 out of 2 sampled residents (Resident #3).

The findings included:

On , Resident #3's health assessments (3) completed after his intial assessment (AHCA Form 1823) were reviewed in the resident's record and showed the following omissions:

a) No date of exam listed.
b) "Yes/No" inquiry whether the resident was appropriate for ALF placement was blank.
c) Level of assistance required for ambulation was blank.
d) "Yes/No" inquiry whether the resident required assistance with medication was blank.

During interview with the Administrator on at 9:45 AM, she stated that the resident had new assessments completed every time he went to the hospital, whether or not there was a significant change in condition. All 3 assessments were exactly the same showing no changes. She acknowledged that the assessments were incomplete with the aforementioned information missing. The facility provided no additional documentation for review at this time.

Class III

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

Based on record review and a staff interview, the facility failed to ensure 1 out of 2 sampled employees (Staff A) had submitted a written statement from a health care provider documenting that the employee does not have any signs or symptoms of communicable ; and, failed to ensure 1 out of 2 sampled employees (Staff B) submitted an annual negative ( ) statement by a health care provider.

The findings included:

a) During record review for Staff A, date of hire , a signed statement by a health care provider

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verifying this employee was free from all communicable , including , could not be found.

b) During record review for Staff B (Administrator), date of hire , a signed statement by a health care provider, dated within the previous year, verifying this employee was free from could not be found.

A request was made to the Administrator for the documentation on at 10:00 AM, but the Administrator was unable to locate this documentation at the time of survey. The facility provided no addtional documentation of the required statements for review at this time.

Class III

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

Based on record review and an interview, the facility failed to ensure a staff member who has completed courses in both First Aid and , and holds a currently valid card documenting completion of such courses, was in the facility at all times for 2 out of 2 sampled staff (Staff A and B).

The findings included:

a) Review of the personnel file for Staff A who works as a live in caregiver revealed no current training with a valid card in First Aid or . Staff A was observed in sole charge of 3 residents on at 8:00 AM.

b) Review of the personnel file for Staff B (Administrator) who works as a live in caregiver revealed no current training with a valid card in First Aid or . Staff B stated during interview on at 9:30 AM that she was the relief person in charge of resident care when Staff A was not working.

The Administrator (Staff B) confirmed that the documentation of training in First Aid and was not present and available for review for either herself or Staff A who were left in sole charge of residents. The facility provided no additional documentation of the required training for review at this time.

Class III

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

Based on record review and an interview, the facility failed to ensure that 1 out of 2 sampled unlicensed staff members (Staff B) who provided assistance with self-administered medications had successfully completed a minimum of 2 hours of annual continuing education training on providing assistance with

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SUMMARY STATEMENT OF DEFICIENCIES
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self-administered medications and safe medication practices in an ALF, conducted by a Registered Nurse (RN) or Pharmacist.

The findings included:

The personnel file for Staff B (Administrator) was reviewed for documentation of a minimum of 2 hours of continuing education training annually on providing assistance with self-administered medications and safe medication practices in an ALF. There was documentation of a 2 hour training dated titled "Medical Errors (Prevention of)", with no signature of a trainer who is an RN or Pharmacist.

The Administrator stated during interview at 10:30 AM on that she was unaware this "Medical Error" training did not suffice for the required "Assistance with Self-Administration of Medication" training for ALF staff who assist residents with self-administration of medication. She acknowledged that the certificate did not have the signature of an RN or Pharmacist. The facility provided no additional documentation of the required training for review at this time.

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(6) FAC

Based on record review and an interview, the facility failed to ensure that 1 out of 1 sampled staff member (Staff B) who was the Administrator and responsible for the facility's food service and the day-to-day supervision of food service staff had obtained a certificate showing annually a minimum of 2 hours of continuing education completed in topics pertinent to nutrition and food service in an ALF.

The findings included:

The Administrator was interviewed on at 10:00 AM and stated she was responsible for the facility's food service and the day-to-day supervision of food service staff. She acknowledged that the owner of the facility does not oversee day to day food service at the facility anymore.

Documentation of a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an ALF for the Administrator was requested at this time. There was no documentation of this training dated within the previous year located in the personnel file for the Administrator. The facility provided no additional documentation of the required training for review at this time.

Class III

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

Based on record review and an interview, the facility failed to ensure that 2 out of 2 sampled staff (Staff A and B) who provides direct care to residents had received at least one hour of training in the facility's policies regarding 's ( ) within 30 days of hire.

The findings included:

a) Review of the personnel file for Staff A who provides direct care to residents revealed there was no documentation of at least one hour of training in the facility's policies regarding 's ( ) within 30 days of hire. Staff A was hired on .

b) Review of the personnel file for Staff B who provides direct care to residents revealed there was no documentation of at least one hour of training in the facility's policies regarding 's ( ) within 30 days of hire. Staff B was hired on .

The Administrator (Staff B) was interviewed at 11:00 AM on and confirmed that the documentation was not present and available for review. The facility provided no additional documentation of the required training for review at this time.

Class III