

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11963982	(X3) DATE SURVEY COMPLETED 04/25/2018
NAME OF PROVIDER OR SUPPLIER BROOKDALE COLONIAL PARK	STREET ADDRESS, CITY, STATE, ZIP CODE 4730 BEE RIDGE ROAD SARASOTA, FL 34233	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced Limited Nursing Service (LNS) survey was conducted on at Brookdale Colonial Park, an assisted living facility (license # 7439) in Sarasota, Florida. The following is description of the deficiencies. 0078 - Staffing Standards - Staff - 58A-5.019(2) FAC Based on staff interview and staff employee files review, the facility failed to ensure 2 (Staff B and C) of 3 staff employee files reviewed had documentation of a negative () test upon hire and annually. The findings included: On , a review of Staff B's employee file revealed this employee was hired There was no documentation this employee had a negative test upon hire and annually as required. On , a review of Staff C's employee file revealed this employee was hired There was no documentation in this employee's file of a negative test upon hire as required. On at 4:30 p.m., during an interview with the Health and Wellness Director and Human Resource Director both confirmed Staff B and C's hire date. They said Staff B and C have been working with facility residents since their hire date. The Human Resource Director said she was unable to find documentation in their employee files for documentation of a negative test upon hire and annual as required. Class III 0081 - Training - Staff In-Service - 58A-5.0191(2) FAC Based on staff interview and staff employee files review, the facility failed to ensure 1 (Staff D) of 3 staff had documentation of 1 hour of control training and 2 (Staff C and D) of 3 staff had documentation of 1 hour of facility emergency procedure training within 30 days of hire. The findings included:		

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On _____, a review of Staff D's employee file revealed this employee was hired _____. There was no documentation Staff D had 1 hour of training in _____ control and 1 hour training of facility emergency procedure within 30 days of hire. On _____, a review of Staff C's employee file revealed this employee was hired _____. There was no documentation Staff C had 1 hour of training in facility emergency procedure within 30 days of hire. On _____ at 4:50 p.m., during an interview with the Health and Wellness Director and Human Resource Director both confirmed Staff C and D's hire date and said Staff C and D have been working with facility residents since their hire date. The Human Resource Director said she was unable to find documentation Staff C and D had the required training within 30 days of their hire date. Class III 0082 - Training - / - 58A-5.0191(3) FAC Based on staff interview and staff employee files review, the facility failed to ensure 2 (Staff C and D) of 3 staff employee files reviewed had documentation they had received training in _____ (/) within 30 days of employment. The findings included: On _____, a review of Staff D's employee file revealed this staff was hired _____. There was no documentation Staff D had 1 hour of training of / within 30 days of hire. On _____, a review of Staff C's employee file revealed this staff was hired _____. There was no documentation Staff C had 1 hour of training of / within 30 days of hire. On _____ at 5:00 p.m., during an interview with the Health and Wellness Director and Human Resource Director both confirmed Staff C and D's hire date and said Staff C and D have been working with facility residents since their hire date. The Human Resource Director said she was unable to find documentation Staff C and D had 1 hour of / training within 30 days of their hire date.		

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Class III N278 - LNS - Records - 58A-5.031(3) FAC Based on staff interview and resident record review the facility failed to ensure 2 (Residents #1 and #2) of 2 residents out of 6 residents on Limited Nursing Service (LNS) had a nursing assessment conducted at least monthly. The findings included: On , review of Resident #1's medical revealed she is receiving LNS service for () at 2 liters per minute (L/M) daily since ordered by the physician on . Review of Resident #1's medical records revealed no monthly assessment was completed for , 2018, , 2018, , 2018 and , 2018. The last monthly assessment was completed on . On , review of Resident #2's medical revealed, she is receiving LNS service for at 2 L/M daily since ordered by the physician on . Review of Resident #2's medical records revealed no monthly assessments were completed for , 2018, , 2018 and , 2018. The last monthly assessment was completed on . On , at 5:45 p.m., during an interview with Health and Wellness Director, she said she was unaware residents on LNS are required to have a minimum of a monthly assessment. She confirmed Resident #1 had not received her monthly LNS assessment since , 2017 and Resident #2 had not received her monthly LNS assessment since , 2018. Class III		