STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965336	**03/16/2018**
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 TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

From [redacted] to [redacted] a Standard Biennial Survey was conducted at Ashford Court (Lic #). There were deficiencies on the time of the survey.

0052 - Medication - Assistance with Self-Admin - 58A-5.0185 (3)

Based on observations and interviews, the assisted living facility failed to ensure unlicensed staff followed the appropriate procedure for assistance with self-administration of medication for 2 of 2 residents (Resident #2 and Resident #5). Specifically, the assisted living facility staff failed to read the medication and prepare the medication in the presence of Resident #2 and Resident #5.

Findings include:

1. During an observation on [redacted], 2018 at 1:01 pm Staff A was observed providing assistance with self-administration of medication to Resident #5. Staff A was observed standing at the medication cart located in the hallway. Staff A reviewed Resident # 5's medication observation record (MOR) and compared it to the medication label to ensure the correct medication was being given. Staff A then poured the pills into a small cup. Staff A then signed the MOR. Staff A then went into Resident # 5's [redacted] stated that she has her medication. Staff A ensured that Resident # 5 took the medications visually with water.

2. During an observation on [redacted], 2018 at 2:07 pm Staff A was observed providing assistance with self-administration of medication to Resident #2. Staff A was observed standing at the medication cart located in the hallway. Staff A reviewed Resident # 2's medication observation record (MOR) and compared it to the medication label to ensure the correct medication was being given. Staff A then poured the pills into a small cup. Staff A then signed the MOR. Staff A then went into Resident # 2's [redacted] stated that she has her medication. Staff A ensured that Resident # 2 took the medications visually with water.

3. During an interview on [redacted], 2018 at 2:10 pm, Staff A reported that she was trained the by other Medication Technician's at the facility on how to pass medication however was not trained to read medication labels or prepare medication in the presence of the residents.

Class III

0081 - Training - Staff In-Service - 58A-5.0191(2) FAC

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

Based on record review and staff interview the facility failed to ensure and document direct care staff received the required training for the following in-service trainings: ADL and Behavioral Needs Training, Recognizing Training and Incident Reporting Training.

The Findings are:
Review of Staff B records (Hire Date of). The record revealed no documented training for ADL and Behavioral Needs Training, Recognizing Training and Incident Reporting Training.

On at 5:17 pm the Administrator, Office Manager and Director of Nursing were interviewed pertaining to in-service certificates in the employees' file and the required documentation.

The Administrator, Office Manager and Director of Nursing reviewed the records during the interview and confirmed that they did not have the required documentation. The Office Manager stated she could provide training transcripts of in-service training if given additional time to access the Human Resource Portal. Additional time was allotted. Upon receipt of training transcripts for Staff B on , no documentation of ADL and Behavioral Needs Training, Recognizing Training and Incident Reporting Training was found.

Class III

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

Based on record review and staff interview, the facility failed to maintain documentation of completion of training in facility's policies and procedures regarding P & P training for one of the three sampled employees. (Staff B, Hire Date of)

On at 5:17 pm the Administrator, Office Manager and Director of Nursing were interviewed pertaining to in-service certificates in the employees' file and the required documentation.

The Administrator, Office Manager and Director of Nursing reviewed the records during the interview and confirmed that they did not have the required documentation. The Office Manager stated she could provide training transcripts of in-service training if given additional time to access the Human Resource Portal. Additional time was allotted. Upon receipt of training transcripts for Staff B, no documentation of P & P training was found.

Class III