

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/22/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966170	(X3) DATE SURVEY COMPLETED 02/26/2019
NAME OF PROVIDER OR SUPPLIER LAUREL OAKS	STREET ADDRESS, CITY, STATE, ZIP CODE 3809 CAPPER RD JACKSONVILLE, FL 32218	

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

0000 - Initial Comments

On 02/26/2019 an unannounced biennial re-licensure survey with Limited Nursing Services and Emergency Power Plan monitoring was conducted at Laurel Oaks Assisted Living Facility (License #10423). Deficient Practice was identified during the survey.

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

Based on document review and staff interview the facility failed to provide evidence of a current statement from a qualified health care provider indicating freedom from () for 2 of 3 employees reviewed (employees A & C)

The findings Include:

The file for Employee A, with a hire date 01/15/2019 did not have a current indication from a health care provider indicating freedom from .

The file for Employee C, with a hire date 01/15/2019 did not have a current indication from a health care provider indicating freedom from .

During an interview with the Administrator on 02/26/2019 at 3:15 PM she agreed there was no documentation of a current screen for employee A or C. She said screening would be completed as soon as possible.

Class III

0083 - Training - First Aid and - 58A-5.0191(5) FAC

Based on employee record review and staff interview the facility failed to ensure that staff who are left alone with residents have current First Aid and () that is offered by an accredited college, university or vocational school; a licensed hospital; the American Red Cross, American Association, or National Safety Council; or a provider approved by the Department of

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Health for 3 of 3 employees (Employees A, B, C). The Findings Include: A review of the employee file for Employee A, who is the Administrator, revealed that his and First Aid certification expired on . A review of the employee file for Employee B revealed that her and First Aid certification expired on . A review of the employee file for Employee C revealed that her certification expired on . During an interview with the House Manager on at 2:30 PM she acknowledged the and First Aid certifications for Employees A, B & C were expired and needed to be updated. She said based on the staffing calendar there are times when Employees A, B, or C may be the only caregiver working in the facility. Class III 0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(6) FAC 429.52 (6), FS Based on record review and staff interview the facility failed to provide evidence of updated Medication Training for 1 of 3 employees reviewed (Employees C). The Findings Include: A review of the personnel file for Employee C revealed her Medication Training expired on . Medication training must be completed annually.		

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During an interview with the Administrator on at 1:30 PM she acknowledged that documentation of updated Medication training was not in the file of Employee C. She said Employee C does assist residents with Medications. Class III 0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC Based on facility record review and staff interview the facility failed to ensure the regular and therapeutic menus were reviewed by a registered dietician annually. The findings include: A review of the facility menus revealed the late time the menus were updated by the Registered Dietician was on with an expiration date of During an interview with the owner/administrator on at 2:05 pm she stated the most recent review of the menus was on She agreed the menus needed to be updated. Class III		