STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932514	R 07/30/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE BROOKSHIRE	**85 BULLDOG BLVD.** **MELBOURNE, FL 32901**

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

0000 - Initial Comments

A revisit to the re-licensure survey with Extended Congregate Care (ECC) and Limited Nursing Service (LNS) was conducted at The Brookshire on . . . . . Deficiencies were identified at the time of the visit.

0052 - Medication - Assistance with Self-Admin - 429.256( ); 58A-5.0185 (3)

Based on observation, resident record review and interview, the facility failed to ensure the unlicensed caregiver (D) followed the correct procedures when assisting a resident (#15) with self-administered medications.

Findings:

Observation during the medication pass on . . . . at 11:50AM revealed staff D, unlicensed caregiver, unlocked the medication cart in the hallway outside the room for resident #15. He removed the Medication Observation Record (MOR) and the medications for resident #15. Staff D reviewed the MOR, reviewed the medication packaging. He placed one 50 mg tablet in a small cup and signed the MOR. He then placed one . . . . . 20mg tablet in the small cup and signed the MOR. He reviewed and signed the MOR for the Polyethylene 3350. He locked the cart, and took the medication cards, the small cup with 2 pills in it, the bottle of Polyethylene bottle, a glass of water and a spoon into the resident's room. He woke resident #15 from sleeping in her bed and assisted her to sit up in the bed. He told her it was time for her medications. Staff D read the labels for the 2 pills aloud to the resident. Next, he opened the Polyethylene , poured the powder into the cap to the line for the correct dose and mixed it into the glass of water. He stirred it and handed it and the small cup with the pills to the resident. She took them, swallowed the pills and drank the liquid. Staff D then returned the medication cards and the bottle to the medication cart and locked the cart.

On . . . . . at 12:00PM, Staff D confirmed he signed the MOR prior to the resident taking the medications and he did not read the label for the polyethylene aloud to the resident.

Class III

0054 - Medication - Records - 58A-5.0185(5) FAC

Based on medication observation record (MOR) review and interview, the facility failed to maintain an accurate and completed record of medications provided for 1 of 1 resident sampled (#15).

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Findings:

Review of the MOR during the medication pass on at 11:50AM revealed no documentation that resident #15 received her 9AM medications on and .

The MOR was blank for the following medications:
50 mg tablet; take one tablet by twice daily
20mg tablet; take one tablet by once daily
Polyethylene 3350; dissolve 17gm (1 capful) into 4 oz of water and drink by once daily

The spaces for the 9AM doses were blank. The reverse side of the MOR did not document the reason the medications were not given.

(photographic evidence obtained)

On at 12:00PM, Staff D confirmed the blank spaces, and stated he was the med tech working on those 2 days and probably forgot to sign the MOR.

Class III

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

Based on personnel record review and interview the facility failed to have evidence that 2 of 6 sampled staff (K & L) had a statement from a health care provider documenting freedom from Communicable .

Findings:

Personnel record review for Staff K, a med tech hired on , did not reveal any documentation that she was free from communicable .

Personnel record review for Staff L, a caregiver hired on , did not reveal any documentation that she was free from communicable .

At 5:05PM on , the human resource director confirmed the findings.

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Class III

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

Based on personnel record review and interview, the facility failed to ensure 4 of 4 staff sampled had received a 2-hour pre-service orientation, which included the required agenda items. (F, K, L, M)

Findings:

Review of the personnel record for staff F (Director of Nursing) revealed a certificate dated and entitled "Facility two-hour pre-service orientation." The certificate listed an agenda that did not include the required topics for the training, specifically resident rights, the facility's license type and services offered by the facility.

Review of the personnel record for staff K, a med tech hired on , and staff M, caregiver hired , both revealed the same type of 2 hour pre-service orientation certificate, also dated . These certificates did not include the required topics for the training.

Review of the personnel record for staff L, caregiver hired , revealed a similar certificate dated , which also did not include the required topics for the training.

(photographic evidence obtained)

On at 5:20PM, the administrator and DON confirmed the findings.

Class III

0086 - Training - ADRD - 58A-5.0191(10) FAC

Based on personnel record review and interview, the facility failed to ensure 2 of 5 direct care staff sampled (D & L) who provided care for persons with 's and Related (ADRD) received the required training.

Findings:

Personnel record review for staff D, caregiver hired , revealed he had received ADRD Level II training on . There was a new certificate dated that was a repeat of the Level I training. There was no documentation to confirm that he had received a 4 hour annual training update as

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required.

(photographic evidence obtained)

Personnel record review for staff L, caregiver hired . . . . , revealed no evidence she had completed Level II training within 9 months of hire.

On . . . . at 5:30 PM, the human resources manager said she had believed taking Level I training again was allowed for the annual update. She confirmed staff L did not have a certificate for Level 2.

Class III

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

Based on personnel record review and interview, the facility failed to provide a one-hour training regarding the facility's policies and procedures for . . . . . ( ) for 2 of 5 staff sampled (administrator and staff F).

Findings:

Personnel record review for the administrator, hired . . , and staff F, hired , revealed certificates for online training regarding the facility's policies and procedures. There was no documentation they received training using the facility's policies and procedures.

On at 5:40PM, the administrator and DON confirmed the finding.

Class III

0091 - Training - Documentation & Monitoring - 58A-5.0191(12) FAC

Based on personnel record review and interview, the facility failed to ensure staff had certificates that included the required information for 1 of 5 sampled staff (D).

Findings:

Personnel record for staff D, a caregiver hired . . . , revealed a certificate dated . . . , which documented an online training entitled "Assisting Residents with Activities of Daily Living." The duration

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of the training was listed as 2 hours.

The requirement for all direct care staff, as outlined in rule 59A-8.0095, F.A.C., is for 3 hours of in-service training within 30 days of employment that covers the following subjects: 1. resident behavior and needs, and 2. providing assistance with the activities of daily living.
There was no documentation to confirm he was a Certified Nursing Assistant (CNA) or nurse that would have exempted him from this training.

On at 5:30PM, the administrator confirmed the finding.

Class III

Z813 - Results of Screening & Notification In File - 59A-35.090(3)(c), FAC

Based on the Background Screening (BGS) Clearinghouse website, personnel record review and interview the facility failed to obtain a copy of the Level 2 Background Screening eligibility results in the record for the Director of Nursing (DON).

Findings:

Personnel record review for the DON revealed a hire date of . Continued review revealed there was no copy of the current Level 2 BGS eligibility in the record. A copy of an eligibility dated was in her record.

On at 4:45 PM, a review of the AHCA BGS Clearinghouse website revealed the current eligibility date for the DON was .

On at 4:55 PM, the DON confirmed the finding.

Unclassified