

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968449	(X3) DATE SURVEY COMPLETED 02/25/2019
NAME OF PROVIDER OR SUPPLIER INSPIRED LIVING AT HIDDEN LAKES	STREET ADDRESS, CITY, STATE, ZIP CODE 1200 54TH AVE W, BRADENTON BRADENTON, FL 34207	

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

0000 - Initial Comments

Assisted Living Facility

On 02/25/2019, a Complaint Survey (CCR#2018018279) was conducted at Inspired Living at Hidden Lakes. At the time of the survey, the facility had deficiencies.

(License #12337)

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on record review and interview the facility failed to have documentation of a pre-to- medical examination (Health Assessment) by a health care provider after a significant change in condition for 1 resident (Resident #1) of 3 residents sampled.

Findings included:

A record review conducted on 02/25/2019 revealed Resident #1 had a health assessment dated 02/25/2019 which indicated that Resident #1 was independent in toileting. (photographic evidence obtained)

Further record review conducted on 02/25/2019 revealed Resident #1 had a service plan dated 02/25/2019 which indicated that Resident #1 required assistance with toileting. Additional documentation indicated a history of and treatment for 02/25/2019 (). (photographic evidence obtained)

During an interview conducted on 02/25/2019 at 1:41pm, the Health and Wellness Director acknowledged and confirmed that Resident #1's Health Assessment did not reflect the significant change in condition and they should have acquired and updated Health Assessment. The Health and Wellness Director stated "Oh no she's not independent, I need to get that corrected."

Class III

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

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Based on record review and interview, two of three staff sampled who provided direct care to residents with _____ and related _____ (ADRD) and who had been employed at least 9 months (B; C) had not received the 4 hours of initial training, nor the additional 4 hours of training within 9 months of employment. Although a third staff member (A) had taken the initial training within 3 months employment, this individual had not taken the additional Level 2 training.

Findings included:

Personnel file review during the _____ investigation found that Staff A, hired _____, had taken _____ Level 1 on _____. However, no subsequent _____'s training could be located other than a repeat of the Level 1 course on _____. Review of the personnel records for Staff B and C, hired _____ and _____ respectively, found no documentation of any _____'s/other ADRD-related training having been obtained for either employee. Interview with the Director of Associate Development at 1:45pm on _____ confirmed that none of the above-referenced staff had the required ADRD training.

Class III