

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11963919	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/12/2019
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NAME OF PROVIDER OR SUPPLIER HARBORCHASE	STREET ADDRESS, CITY, STATE, ZIP CODE 2960 TAMPA ROAD PALM HARBOR, FL 34684
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A 083 SS=D	<p>58A-5.0191(5) FAC Training - First Aid and</p> <p>(5) FIRST AID AND (). A staff member who has completed courses in First Aid and and holds a currently valid card documenting completion of such courses must be in the facility at all times.</p> <p>(a) Documentation that the staff member possess current . certification that requires the student to demonstrate, in person, that he or she is able to perform . and which is issued by an instructor or training provider that is approved to provide . training by the American Red Cross, the American . Association , the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education satisfies this requirement.</p> <p>(b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, Part III, F.S., shall be considered as having met the training requirements for both First Aid and C.P.R.</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility was unable to provide proof that there was a staff member in the facility at all times that had completed a course in the subject of (. Training).</p> <p>Findings included:</p> <p>A review of employee records conducted on showed that Staff C was scheduled for the 10 PM- 6 AM shift. A review of Staff C's record showed a lack of . Training.</p> <p>The director of nursing (DON) was interviewed at</p>	A 083		
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AHCA Form 3020-0001 LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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A 083	<p>Continued From page 1</p> <p>3:59 PM on and was asked to provide proof that there was always a staff member scheduled for the 10 PM- 6 AM shift that had Training. The DON stated that they could not provide proof.</p> <p>At 4:14 PM on, the DON provided a copy of online training for the Overnight Nurse related to A review of the training certificate indicted that the training provider was not recognized by the State as an approved provider (photographic evidence obtained).</p> <p>Class III</p>	A 083		
A 086 SS=D	<p>58A-5.0191(10) FAC Training - ADRD (10) AND RELATED ("ADRD") TRAINING REQUIREMENTS. Facilities which advertise that they provide special care for persons with ADRD, or who maintain secured areas as described in Chapter 4, Section 64.4.6 of the Florida Building Code, as adopted in rule 61G20-1.001, F.A.C., Florida Building Code Adopted, must ensure that facility staff receive the following training.</p> <p>(a) Facility staff who interact on a daily basis with residents with ADRD but do not provide direct care to such residents and staff who provide direct care to residents with ADRD, shall obtain 4 hours of initial training within 3 months of employment. Completion of the core training program between and shall satisfy this requirement. Facility staff who meet the requirements for ADRD training providers under paragraph (g) of this subsection, will be considered as having met this requirement. Initial training, entitled " and Related Level I Training."</p>	A 086		

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A 086	<p>Continued From page 2</p> <p>must address the following subject areas:</p> <ol style="list-style-type: none"> 1. Understanding _____'s _____ and related _____ 2. Characteristics of _____ 3. Communicating with residents with _____'s _____ 4. Family issues; 5. Resident environment; and, 6. Ethical issues. <p>(b) Staff who have successfully completed both the initial one hour and continuing three hours of ADRD training pursuant to sections 400.1755, 429.917 and 400.6045(1), F.S., shall be considered to have met the initial assisted living facility _____ and Related _____ Level I Training.</p> <p>(c) Facility staff who provide direct care to residents with ADRD must obtain an additional 4 hours of training, entitled " _____ and Related _____ Level II Training," within 9 months of employment. Facility staff who meet the requirements for ADRD training providers under paragraph (g) of this subsection, will be considered as having met this requirement. _____ and Related _____ Level II Training must address the following subject areas as they apply to these _____:</p> <ol style="list-style-type: none"> 1. Behavior management, 2. Assistance with ADLs, 3. Activities for residents, 4. Stress management for the care giver; and, 5. Medical information. <p>(d) A detailed description of the subject areas that must be included in an ADRD curriculum which meets the requirements of paragraphs (a) and (b) of this subsection, can be found in the document "Training Guidelines for the Special Care of Persons with _____'s _____ and Related _____" dated _____, incorporated by _____</p>	A 086		

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A 086	<p>Continued From page 3</p> <p>reference, available from the Department of Elder Affairs, 4040 Esplanade Way, Tallahassee, Florida 32399-7000.</p> <p>(e) Direct care staff shall participate in 4 hours of continuing education annually as required under section 429.178, F.S. Continuing education received under this paragraph may be used to meet 3 of the 12 hours of continuing education required by section 429.52, F.S., and subsection (1) of this rule, or 3 of the 6 hours of continuing education for extended congregate care required by subsection (7) of this rule.</p> <p>(f) Facility staff who have only incidental contact with residents with ADRD must receive general written information provided by the facility on interacting with such residents, as required under section 429.178, F.S., within three (3) months of employment. "Incidental contact" means all staff who neither provide direct care nor are in regular contact with such residents.</p> <p>(g) Persons who seek to provide ADRD training in accordance with this subsection must provide the department or its designee with documentation that they hold a Bachelor's degree from an accredited college or university or hold a license as a registered nurse, and:</p> <ol style="list-style-type: none"> 1. Have 1 year teaching experience as an educator of caregivers for persons with _____ or related _____, or 2. Three years of practical experience in a program providing care to persons with _____ or related _____, or 3. Completed a specialized training program in the subject matter of this program and have a minimum of two years of practical experience in a program providing care to persons with _____ or related _____. <p>(h) With reference to requirements in paragraph (g), a Master's degree from an accredited college</p>	A 086		
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A 086	<p>Continued From page 4</p> <p>or university in a subject related to the content of this training program can substitute for the teaching experience. Years of teaching experience related to the subject matter of this training program may substitute on a year-by-year basis for the required Bachelor's degree referenced in paragraph (g).</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide proof of four hours of initial training, within three months of employment, in the subject of _____ and Related Level 1 Training (ADRD 1) for three (Administrator, Staff B and Staff C) of four employee records sampled.</p> <p>Findings included:</p> <p>A review of employee records conducted on _____ showed that the Administrator was hired on _____, staff B was hired on _____, and Staff C was hired on _____. A review of the three employee records showed a lack of proof of ADRD 1 Training.</p> <p>The Administrator was interviewed at 3:27 PM on _____ concerning the lack of proof in records for the Administrator, Staff B, and Staff C of ADRD 1 Training. The Administrator stated that they could not find proof of the required training.</p> <p>Class III</p>	A 086		
A 090 SS=D	<p>58A-5.0191(11) FAC Training - _____</p> <p>(11) _____ TRAINING.</p>	A 090		

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A 090	<p>Continued From page 5</p> <p>(a) Currently employed facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policies and procedures regarding _____</p> <p>(b) Newly hired facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policy and procedures regarding _____ within 30 days after employment.</p> <p>(c) Training shall consist of the information included in rule 58A-5.0186, F.A.C.</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide proof of training in the subject of the facility's policies and procedures regarding _____ (_____ Training), within 30 days of employment, for three (Administrator, Staff A, and Staff B) of four employee records reviewed.</p> <p>Findings included:</p> <p>A review of employee records conducted on _____ 19 showed that the Administrator was hired on _____, Staff A was hired on _____, and Staff B was hired on _____. The review of the three employee records showed no proof of _____ Training.</p> <p>The Administrator was interviewed beginning at 3:19 PM concerning the lack of proof of _____ Training for the Administrator, Staff A, and Staff B. The Administrator was unable to provide proof of the required _____ Training.</p>	A 090		

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A 090	Continued From page 6 Class III	A 090		
A 091 SS=D	58A-5.0191(12) FAC Training - Documentation & Monitoring (12) TRAINING DOCUMENTATION AND MONITORING. (a) Except as otherwise noted, certificates, or copies of certificates, of any training required by this rule must be documented in the facility's personnel files. The documentation must include the following: 1. The title of the training program, 2. The subject matter of the training program, 3. The training program agenda, 4. The number of hours of the training program, 5. The trainee's name, dates of participation, and location of the training program, 6. The training provider's name, dated signature and credentials, and professional license number, if applicable. (b) Upon successful completion of training pursuant to this rule, the training provider must issue a certificate to the trainee as specified in this rule. (c) The facility must provide the Department of Elder Affairs and the Agency for Health Care Administration with training documentation and training certificates for review, as requested. The department and agency reserve the right to attend and monitor all facility in-service training, which is intended to meet regulatory requirements. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide training documentation that	A 091		

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A 091	<p>Continued From page 7</p> <p>included the dates of participation in training programs for three (Staff A, Staff B, and Staff C) of four employee records reviewed.</p> <p>Findings included:</p> <p>A review of employee records conducted on showed that Staff A was hired on Staff B was hired on, and Staff C was hired on</p> <p>A review of training records for Staff A and Staff B showed a single training certificate for each employee for required in-services including control, assistance with activities of daily living, elopement training, incident reporting, emergency procedures, resident rights, and neglect, and safe food handling. The certificates presented for Staff A and Staff B did not indicate the dates of participation in these trainings, and only stated Day 1 and Day 2 (photographic evidence obtained). The review of Staff C's training certificates showed no dates of participation in the subject's of incident reporting, facility emergency procedures, or safe food handling.</p> <p>An interview was conducted with the Administrator beginning at 3:29 PM on concerning the lack of noted dates of participation for in-service training on Staff A's, Staff B's, and Staff C's training certificates. The Administrator was unable to provide clarification on actual dates of in-service trainings.</p> <p>Class III</p>	A 091		
CZ816 SS=C	408.809(2)(a-c); 59A-35.090(2)(d)-(3) Background Screening-Compliance Attestation	CZ816		

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CZ816	<p>Continued From page 8</p> <p>408.809</p> <p>(2) Every 5 years following his or her licensure, employment, or entry into a contract in a capacity that under subsection (1) would require level 2 background screening under chapter 435, each such person must submit to level 2 background rescreening as a condition of retaining such license or continuing in such employment or contractual status. For any such rescreening, the agency shall request the Department of Law Enforcement to forward the person's _____ to the Federal Bureau of Investigation for a national criminal history record check unless the person's _____ are enrolled in the Federal Bureau of Investigation's national retained print _____ notification program. If the _____ of such a person are not retained by the Department of Law Enforcement under s. 943.05(2)(g) and (h), the person must submit _____ electronically to the Department of Law Enforcement for state processing, and the Department of Law Enforcement shall forward the _____ to the Federal Bureau of Investigation for a national criminal history record check. The _____ shall be retained by the Department of Law Enforcement under s. 943.05(2)(g) and (h) and enrolled in the national retained print _____ notification program when the Department of Law Enforcement begins participation in the program. The cost of the state and national criminal history records checks required by level 2 screening may be borne by the licensee or the person _____. Until a specified agency is fully implemented in the clearinghouse created under s. 435.12, the agency may accept as satisfying the requirements of this section proof of compliance with level 2 screening standards submitted within</p>	CZ816		

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CZ816	<p>Continued From page 9</p> <p>the previous 5 years to meet any provider or professional licensure requirements of the agency, the Department of Health, the Department of Elderly Affairs, the Agency for Persons with _____, the Department of Children and Families, or the Department of Financial Services for an applicant for a certificate of authority or provisional certificate of authority to operate a continuing care retirement community under chapter 651, provided that:</p> <p>(a) The screening standards and disqualifying offenses for the prior screening are equivalent to those specified in s. 435.04 and this section;</p> <p>(b) The person subject to screening has not had a break in service from a position that requires level 2 screening for more than 90 days; and</p> <p>(c) Such proof is accompanied, under penalty of perjury, by an attestation of compliance with chapter 435 and this section using forms provided by the agency.</p> <p>59A-35.090(2) Processing Screening Requests, Required Documents and Fees.</p> <p>(d) An Attestation of Compliance with Background Screening Requirements, AHCA Form 3100-0008, _____, herein incorporated by reference, available at http://www.flrules.org/Gateway/reference.asp?No=Ref-09106, and available from the Agency for Health Care Administration at: http://ahca.myflorida.com/MCHQ/Central_Service/s/Background_Screening/Regulations_Forms.shtml. This form must be completed by the individual and retained by the provider upon hire to attest that they meet the requirements for qualifying for employment, they have not been unemployed for more than 90 days from a position that requires Level 2 screening, and they agree to inform the employer immediately if _____ for any</p>	CZ816		
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CZ816	<p>Continued From page 10</p> <p>disqualifying offense.</p> <p>(e) An administrator or chief financial officer must be screened and qualified prior to to the position.</p> <p>(3) Results of Screening and Notification.</p> <p>(a) Final results of background screening requests will be provided through the Agency's secure website that may be accessed by all health care providers applying for or actively licensed through the Agency that are registered with the Care Provider Background Screening Clearinghouse. The secure website is located at: apps.ahca.myflorida.com/SingleSignOnPortal.</p> <p>(b) If a Level 2 criminal history is incomplete, a certified letter will be sent to the individual being screened requesting the report and court disposition information. If the letter is returned unclaimed, a copy of the letter will be sent by regular mail. Pursuant to section 435.05(1)(d), F.S., the missing information must be filed with the Agency within 30 days of the Agency's request or the individual is subject to disqualification in accordance with section 435.06(3), F.S.</p> <p>(c) The eligibility results of employee screening and the signed Attestation referenced in subsection 59A-35.090(2), F.A.C., must be in the employee's personnel file, maintained by the provider.</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide proof that employees completed an affidavit of compliance with background screening requirements (Compliance Affidavits) for four (Administrator, Staff A, Staff B, and Staff C) of four employee records sampled.</p>	CZ816		

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CZ816	Continued From page 11 Findings included: A review of employee records conducted on _____ showed that the Administrator was hired on _____, Staff A was hired on _____, Staff B was hired on _____, and Staff C was hired on _____. A review of the four employee records revealed no proof of Compliance Affidavits. The Administrator was interviewed on _____ at 3:19 PM concerning the lack of proof of Compliance Affidavits for the Administrator, Staff A, Staff B, and Staff C. The Administrator reviewed the employee records and stated that they did not see the Compliance Affidavits. Unclassified	CZ816		
A 000	Initial Comments A re-licensure survey with extended congregate care (ECC) was conducted at Harborchase on _____. Deficiencies were identified at the time of survey.	A 000		
A 078 SS=D	58A-5.019(2) FAC Staffing Standards - Staff (2) STAFF. (a) Within 30 days after beginning employment, newly hired staff must submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable _____. The examination performed by the health care provider must have been conducted no earlier than 6 months before submission of the statement. Newly hired staff does not include an employee transferring without a break in service from one facility to another when the facility is under the same management	A 078		

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A 078	<p>Continued From page 12</p> <p>or ownership.</p> <p>1. Evidence of a negative examination must be documented on an annual basis. Documentation provided by the Florida Department of Health or a licensed health care provider certifying that there is a shortage of testing materials satisfies the annual examination requirement. An individual with a positive test must submit a health care provider's statement that the individual does not constitute a risk of</p> <p>2. If any staff member has, or is suspected of having, a communicable , such individual must be immediately removed from duties until a written statement is submitted from a health care provider indicating that the individual does not constitute a risk of transmitting a communicable</p> <p>(b) Staff must be qualified to perform their assigned duties consistent with their level of education, training, preparation, and experience. Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff must exercise their responsibilities, consistent with their qualifications, to observe residents, to document observations on the appropriate resident's record, and to report the observations to the resident's health care provider in accordance with this rule chapter.</p> <p>(c) All staff must comply with the training requirements of rule 58A-5.0191, F.A.C.</p> <p>(d) An assisted living facility to provide services to residents must ensure that individuals providing services are qualified to perform their assigned duties in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor must</p>	A 078		

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NAME OF PROVIDER OR SUPPLIER HARBORCHASE	STREET ADDRESS, CITY, STATE, ZIP CODE 2960 TAMPA ROAD PALM HARBOR, FL 34684
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A 078	<p>Continued From page 13</p> <p>specifically describe the services the staffing agency or contractor will provide to residents.</p> <p>(e) For facilities with a licensed capacity of 17 or more residents, the facility must:</p> <ol style="list-style-type: none"> 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and, 2. Maintain time sheets for all staff. <p>(f) Level 2 background screening must be conducted for staff, including staff by the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S.</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide proof of a written statement from a health care provider documenting that the individual does not have signs or symptoms of a communicable within 30 days of employment (Communicable Statement), for one (Staff C) of four employee records sampled.</p> <p>Findings included:</p> <p>A review of employee records conducted on showed that staff C was hired on</p> <p>A review of Staff C's record revealed an absence of a Communicable Statement.</p> <p>The Administrator was interviewed at 3:41 PM on concerning the lack of proof of a Communicable Statement in Staff C's record. The Administrator reviewed staff C's record and stated that they did not see the required Communicable Statement.</p> <p>Class III</p>	A 078		
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A 081 A 081 SS=D	Continued From page 14 58A-5.0191() FAC Training - Staff In-Service (2) STAFF PRESERVICE ORIENTATION. (a) Facilities must provide a preservice orientation of at least 2 hours to all new assisted living facility employees who have not previously completed core training as detailed in subsection (1). (b) New staff must complete the preservice orientation prior to interacting with residents. (c) Once complete, the employee and the facility administrator must sign a statement that the employee completed the preservice orientation which must be kept in the employee's personnel record. (d) In addition to topics that may be chosen by the facility administrator, the preservice orientation must cover: 1. Resident's rights; and, 2. The facility's license type and services offered by the facility. (3) STAFF IN-SERVICE TRAINING. Facility administrators or managers shall provide or arrange for the following in-service training to facility staff: (a) Staff who provide direct care to residents, other than nurses, certified nursing assistants, or home health aides trained in accordance with rule 59A-8.0095, F.A.C., must receive a minimum of 1 hour in-service training in control, including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use its control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to borne may be used to meet this	A 081 A 081		

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A 081	Continued From page 15 requirement. (b) Staff who provide direct care to residents must receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects: 1. Reporting adverse incidents. 2. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. (c) Staff who provide direct care to residents, who have not taken the core training program, shall receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects: 1. Resident rights in an assisted living facility. 2. Recognizing and reporting resident neglect, and The facility must use its prevention policies and procedures when offering this training. (d) Staff who provide direct care to residents, other than nurses, CNAs, or home health aides trained in accordance with rule 59A-8.0095, F.A.C., must receive 3 hours of in-service training within 30 days of employment that covers the following subjects: 1. Resident behavior and needs. 2. Providing assistance with the activities of daily living. (e) Staff who prepare or serve food, who have not taken the assisted living facility core training must receive a minimum of 1-hour-in-service training within 30 days of employment in safe food handling practices. (f) All facility staff shall receive in-service training regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment. 1. All facility staff shall be provided with a copy of the facility's resident elopement response policies	A 081			

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A 081	<p>Continued From page 16</p> <p>and procedures.</p> <p>2. All facility staff shall demonstrate an understanding and competency in the implementation of the elopement response policies and procedures.</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide proof of training in the subject of elopement response training (Elopement Training), within 30 days of employment, for one (Administrator) of four employee records reviewed and failed to provide proof of 2 hours training of staff completed prior to interacting with residents (Pres-Service Orientation) for three (Staff A, Staff B, and Staff C) of four employee records sampled.</p> <p>Findings included:</p> <p>A review of employee records conducted on showed that the administrator was hired on, Staff A was hired on, Staff B was hired on, and Staff C was hired on A review of the Administrator's record showed no proof of Elopement Training.</p> <p>The Administrator was interviewed at 3:19 PM concerning proof of Elopement Training in their file. The Administrator was unable to provide proof of Elopement Training.</p> <p>The review of employee records for Staff A, B, and C on also revealed no proof of Pre-Service Orientation.</p> <p>An interview was conducted with the Administrator at 3:29 PM on concerning the lack of proof of Pre-Service Orientation for</p>	A 081		
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A 081	Continued From page 17 Staff A, Staff B, and Staff C. The Administrator was unable to provide proof of the required Pre-Service Orientations. Class III	A 081		
A 082 SS=D	58A-5.0191(4) FAC Training - / . . . (4) Pursuant to section 381.0035, F.S., all facility employees, with the exception of employees subject to the requirements of section 456.033, F.S., must complete a one-time education course on and , including the topics prescribed in the section 381.0035, F.S. New facility staff must obtain the training within 30 days of employment. Documentation of compliance must be maintained in accordance with subsection (12), of this rule. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide proof of required training, within 30 days of employment, in the subject of Training) for two (Staff A and Staff B) of four employee records reviewed. Findings included: A review of employee records conducted on showed that Staff A was hired on and Staff B was hired on A review of the records for Staff A and Staff B showed a lack of proof of / Training.	A 082		

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A 082	<p>Continued From page 18</p> <p>The Administrator was interviewed at 3:41 PM on concerning the lack of proof of / Training for staff A and Staff B. The Administrator was unable to provide proof of the required training for Staff a and Staff B.</p> <p>Class III</p>	A 082		