Agency for Health Care Administration

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | AL11969380 | A. BUILDING: _____ B. WING _____ | C 09/11/2020 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| ARBORS OF GULF BREEZE | 50 JOACHIM DR GULF BREEZE, FL 32561 |

| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETE DATE |
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| A 000 | Initial Comments<br><br>On , , 2020 a complaint survey was conducted for allegations contained within complaint number 2020015016, a biennial survey with limited nursing services, and a generator assessment were completed at Arbors of Gulf Breeze, in Gulf Breeze, FL. A focused . . . . control survey was conducted in conjunction. Deficient practice was found at the time of the survey. | A 000 | | |
| A 081 SS=D | 59A-36.011( ) FAC Training - Staff In-Service<br><br>(2) STAFF PRESERVICE ORIENTATION.<br>(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).<br>(b) New staff must complete the preservice orientation prior to interacting with residents.<br>(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.<br>(d) In addition to topics that may be chosen by the facility administrator, the preservice orientation must cover:<br>1. Resident's rights; and,<br>2. The facility's license type and services offered by the facility.<br>(3) STAFF IN-SERVICE TRAINING. Facility administrators or managers shall provide or arrange for the following in-service training to facility staff:<br>(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 | A 081 | | |

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| A 081 | Continued From page 1<br>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 requirement.<br>(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:<br>1. Reporting adverse incidents.<br>2. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation.<br>(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:<br>1. Resident rights in an assisted living facility.<br>2. Recognizing and reporting resident , neglect, and , . The facility must use its prevention policies and procedures when offering this training.<br>(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:<br>1. Resident behavior and needs.<br>2. Providing assistance with the activities of daily living.<br>(e) Staff who prepare or serve food, who have not taken the assisted living facility core training must | A 081 | | |

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| A 081 | Continued From page 2<br><br>receive a minimum of 1-hour-in-service training within 30 days of employment in safe food handling practices.<br>(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.<br>1. All facility staff shall be provided with a copy of the facility's resident elopement response policies and procedures.<br>2. All facility staff shall demonstrate an understanding and competency in the implementation of the elopement response policies and procedures.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on staff record review and interview, the facility failed to provide mandatory training for 1 of 3 (B) sampled staff.<br><br>The findings include:<br><br>On . . . . a record review was conducted for staff B, a resident assistant. Staff B was hired on . . . . . did not have the 2 hour pre-service orientation prior to interacting with residents, and had not completed the following required trainings: Elopement Response, Reporting Major Incidents, Reporting Adverse Incidents, Facility emergency procedures, Incident reporting , Resident rights and Recognizing/Reporting /Neglect training or Nutritional & Safe Food Handling .<br><br>On . . . . at approximately 11:00 AM, an interview was conducted with the Business Office Manager (BOM) who stated she is responsible for ensuring staff had teh required trainings and ensuring staff records were up to date . The BOM stated she was not aware Staff B had not | A 081 | | |

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| A 081 | Continued From page 3<br>completed her mandatory training.<br><br>Class III | A 081 | | |
| A 082 SS=D | 59A-36.011(4) FAC Training - / .<br>(4) . . / . . . .<br>. . . . . ( . / . . . ). 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.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on staff record review and interview, the facility failed to provide . . . . . ( ) training for 1 of 3 (B) sampled staff.<br><br>The findings include:<br><br>On a staff record review was conducted for staff B, a resident assistant. Staff B was hired on and did not have training. .<br><br>On at approximately 11:00 AM, an interview was conducted with the Business Office Manager (BOM) who stated she is responsible for ensuring staff have the required training and ensuring staff records are up to date. The BOM stated she was not aware Staff B had not completed her mandatory training. | A 082 | | |

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| A 082 | Continued From page 4<br>Class III | A 082 | | |
| A 090 SS=D | 59A-36.011(11) FAC Training -<br><br>(11) TRAINING.<br>(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<br>(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.<br>(c) Training shall consist of the information included in rule 59A-36.009, F.A.C.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on staff record review and interview, the facility failed to provide training for 1 of 3 (B) sampled staff.<br><br>The findings include:<br><br>On a staff record review was conducted for staff B, a resident assistant. Staff B was hired on and did not have the 2 hour pre-service orientation prior to interacting with residents.<br><br>On at approximately 11:00 AM, an interview was conducted with the Business Office Manager (BOM) who stated she was responsible for ensuring staff have the required trainings and ensuring staff records were up to date. The BOM stated she was not aware Staff B had not | A 090 | | |

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| A 090 | Continued From page 5<br>completed her mandatory training.<br><br>Class III | A 090 | | |
| CZ814 | 435.12(2)(b-d), FS Background Screening Clearinghouse<br><br>435.12(2) Care Provider Background Screening Clearinghouse.-<br>(b) Until such time as the , are enrolled in the national retained print notification program at the Federal Bureau of Investigation, an employee with a break in service of more than 90 days from a position that requires screening by a specified agency must submit to a national screening if the person returns to a position that requires screening by a specified agency.<br>(c) An employer of persons subject to screening by a specified agency must register with the clearinghouse and maintain the employment status of all employees within the clearinghouse. Initial employment status and any changes in status must be reported within 10 business days.<br>(d) An employer must register with and initiate all criminal history checks through the clearinghouse before referring an employee or potential employee for electronic , submission to the Department of Law Enforcement. The registration must include the employee's full first name, middle initial, and last name; social security number; date of birth; mailing address; ; and race. Individuals, persons, applicants, and controlling interests that cannot legally obtain a social security number must provide an individual taxpayer identification number.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on staff interview, and record review the facility failed to include 1 of 3 (employee B) on the | CZ814 | | |

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| CZ814 | Continued From page 6<br><br>staff roster with background screening clearinghouse.<br><br>The Findings include:<br><br>A review of the employee roster failed to identify Employee B. Employee B has a hire date of . The business office manager (BOM) was identified as the person who would have this information.<br><br>The business office manager was interviewed on at 12:30 PM. She was asked to pull up the facility roster with the clearinghouse. She did and was asked to identify Employee B. She stated, "No, I do not see her on the roster." | CZ814 | | |