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
	AL11969128	A. BUILDING: _____ B. WING _____	R 03/04/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANGELCARE WITH A VISION LLC	108 WAGNER ROAD BONIFAY, FL 32425

(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
{A 000}	Initial Comments An unannounced revisit for complaint #2024013626 was completed at Angelcare With A Vision Assisted Living Facility on - . This survey was conducted in conjunction with a second revisit to the biennial survey, which originally ended on . Deficiencies remained uncorrected at the time of the survey.	{A 000}		
{A 120} SS=I	429.17(3) .275(1); 59A-36.013(1) FAC Fiscal - Financial Stability 429.17 (3) In addition to the requirements of part II of chapter 408, each facility must report to the agency any adverse court action concerning the facility's financial viability, within 7 days after its occurrence. The agency shall have access to books, records, and any other financial documents maintained by the facility to the extent necessary to determine the facility's financial stability. 429.275 (1) The administrator or owner of a facility shall maintain accurate business records that identify, summarize, and classify funds received and expenses disbursed and shall use written accounting procedures and a recognized accounting system. 59A-36.013 Fiscal Standards. (1) FINANCIAL STABILITY. The facility must be administered on a sound financial basis in order to ensure adequate resources to meet resident needs pursuant to the requirements of chapter 408, part II, part I, F.S., and rule chapter 59A-35, F.A.C., and this rule chapter.	{A 120}		

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{A 120}	Continued From page 1 This Statute or Rule is not met as evidenced by: Based on record review and staff interview, the facility failed to maintain accurate business records that identify, summarize, and classify funds received and expenses disbursed, and failed to utilize a recognized accounting system. Business records provided consisted of a bank account history which indicated deposits and withdrawals, but did not indicate which resident a deposit originated from, where the payment came from, and were unclear as to who benefitted from expenditures. The lack of utilizing generally accepted accounting procedures affected all 15 residents, 14 currently living at the facility (Residents #6, #7, #8, #9, #10, #11, #12, #13, #14, #15, #16, #17, #18, #19) and Resident #5, who was located at a , , , facility at the time of the survey. The findings include: On , the facility's accounting records were requested for review. The Administrator provided the "Account History" for what she stated was the facility account. The account history dates ranged from to and did not contain the account number or account owner's information. A review of the account history found deposits and withdrawals, but did not indicate which resident the payments were associated, and the account history was unclear as to who benefitted from any expenditures. The review also found a handwritten record of multiple withdrawals but did not provide a clear accounting of the expenditures. (Photographic evidence obtained.) A record review of the facility's account history from to was conducted. Deposits totaling $21,453. 67 included:	{A 120}		

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{A 120}	Continued From page 2 $857.00 SSA (Social Security Administration) $810.00 SSA $1,013.00 $841.00 $4,824.67 SSI (Supplemental Security Income) $967.00 SSI $177.00 SSI $30.00 SSI $967.00 SSI $967.00 HCCLAIM (Healthcare EFT [electronic funds transfer] Standard to identify a payment as healthcare) $3,750.00 HCCLAIM, $6,250.00 Further review of the facility's account history from to revealed expenditures that were unclear, did not have a note indicating the reason for the expenditure, and some of which did not appear to be related to business expenses. These included: - cash app $20.00 - Cozy Brown (restaurant) Mobile, AL $49.48 - Nayax Amusement $21.00 - Google sunshining $19.99 - Google story matrix $12.99 - Wendy's (restaurant) Mobile $11.76 - McDonald's (restaurant) Mobile $16.46 - Waffle House (restaurant) Mobile $37.52 - Cash app Denisia $30.00 - NT Lingerie Mobile, AL $30.95 - Cozy Brown, Mobile, AL $40.90 - Shorten Hondrytech (unknown) $0.50 - Cozy Brown Mobile $37.18 - Waffle House $30.25 - Golden Corral (Restaurant) Mobile, AL	{A 120}		

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{A 120}	Continued From page 3	{A 120}		

$150.52
- Waffle House Mobile $58.00
- Transfer to MBR (multi-bank reporting) $60.00
- 7 Days (gas station) Prichard, AL $11.51
- ATM (automated teller machine) withdrawal Prichard, AL $103.25

Further review of the facility's account history from to revealed expenditures that had a handwritten note indicating the reason for the expenditure, but remained unclear, and did not appear to be business expenses:
- 7 Days Prichard $50.77, noted as gas
- Altitude (gas station) Mobile $6.60 noted as gas
- Altitude Mobile $62.66 noted as gas
- Best Western (hotel) Mobile $412.93 unable to read the note
- ATM withdrawal Prichard, AL $22.50 noted as gas
- 7 Days Prichard, AL $16.65 noted as gas
- Jaguar 2 (gas station) Mobile, AL $49.36 noted as gas
- Talquin Electric (does not provide services in the county where facility is located) $320.81 noted as lights
- American Lube Mobile, AL $139.43 noted as oil change
- American Lube Mobile, AL $98.54 noted as oil change
- Raceway (gas station) Mobile, AL $11.28
- The Agency LLC (unknown) $1,140.21 noted as payroll for Administrator
- The Agency LLC $1,140.21 noted as payroll for Administrator
ATM withdrawal Mobile, AL $204.00 noted as tires
Circle K (gas station) Pensacola $43.13 noted as gas

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{A 120}	Continued From page 4 On at approximately 9:45 AM, an interview was conducted with the Administrator to clarify some of the business expenditures listed on the facility's to account history. She stated the two withdrawals on , each in the amount of $1,140.21, to The Agency LLC (Limited Liability Company) were for her facility in Mobile, Alabama, and were not for this facility's payroll as indicated in the handwritten note. On at approximately 10:00 AM, an additional interview was conducted with the Administrator, who confirmed the facility account has withdrawals for her personal use and that is how she pays her monthly salary. The Administrator further stated for her, the facility money and her personal money are not intermingling, and it is self-explanatory the way it is written. The Administrator stated she now has an additional account for her personal expenses, but she is not used to using that account. She stated starting in , once the resident payments come in, she will transfer her monthly salary all at once into her personal account she opened in . The Administrator stated she was still using the business account card for personal transactions out of habit, but she counts those transactions towards her salary. She stated she does not have a separate log to show individual resident expenses. She confirmed that each resident's money is in the same account that the facility's business expenses are paid from. Class II	{A 120}		

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{A 123}	Continued From page 5	{A 123}		
{A 123} SS=H	429.27( ) FS; 59A-36.013(2) FAC Fiscal - Resident Trust Funds 429.27 (3) A facility, upon mutual consent with the resident, shall provide for the safekeeping in the facility of personal effects not in excess of $500 and funds of the resident not in excess of $500 cash, and shall keep complete and accurate records of all such funds and personal effects received. If a resident is absent from a facility for 24 hours or more, the facility may provide for the safekeeping of the resident's personal effects in excess of $500. (4) Any funds or other property belonging to or due to a resident, or expendable for his or her account, which is received by a facility shall be trust funds which shall be kept separate from the funds and property of the facility and other residents or shall be specifically credited to such resident. Such trust funds shall be used or otherwise expended only for the account of the resident. At least once every 3 months, unless upon order of a court of competent jurisdiction, the facility shall furnish the resident and his or her guardian, trustee, or conservator, if any, a complete and verified statement of all funds and other property to which this subsection applies, detailing the amount and items received, together with their sources and disposition. In any event, the facility shall furnish such statement annually and upon the discharge or transfer of a resident. Any governmental agency or private charitable agency contributing funds or other property to the account of a resident shall also be entitled to receive such statement annually and upon the discharge or transfer of the resident. (5) Any personal funds available to facility residents may be used by residents as they	{A 123}		

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{A 123}	Continued From page 6	{A 123}		

choose to obtain clothing, personal items, leisure activities, and other supplies and services for their personal use. A facility may not demand, require, or contract for payment of all or any part of the personal funds in satisfaction of the facility rate for supplies and services beyond that amount agreed to in writing and may not levy an additional charge to the individual or the account for any supplies or services that the facility has agreed by contract to provide as part of the standard monthly rate. Any service or supplies provided by the facility which are charged separately to the individual or the account may be provided only with the specific written consent of the individual, who shall be furnished in advance of the provision of the services or supplies with an itemized written statement to be attached to the contract setting forth the charges for the services or supplies.

59A-36.013
(2) RESIDENT TRUST FUNDS. Funds or other property received by the facility belonging to or due a resident, including personal funds, must be held as trust funds and expended only for the resident's account. Resident funds or property may be held in one bank account if a separate written accounting for each resident is maintained. A separate bank account is required for facility funds; co-mingling resident funds with facility funds is prohibited. Written accounting procedures for resident trust funds must include income and expense records of the trust fund, including the source and disposition of the funds.

This Statute or Rule is not met as evidenced by:
Based on record review, review of receipts, and staff interview, the facility failed to maintain separate bank accounts to prevent co-mingling of

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{A 123}	Continued From page 7	{A 123}		

facility funds with resident funds and the Facility Administrator's personal expenses for 10 of 15 residents currently living at the facility (Resident #6, # 7, #8, #9, #10, #11, #12, #13, #14, #15) plus one additional resident (Resident #5) who was located at a , , facility at the time of the survey.

The findings include:

A record review of the facility's "Account History" for to was conducted. It was found that a total of 9 deposits were listed as an electronic deposit from either SSI (Supplemental Security Income), SSA (Social Security Administration), or HCCLAIMPMT (Healthcare EFT [electronic funds transfer] Standard) to identify payment as healthcare.

A further review of the facility's "Account History" for to revealed transactions that appeared to not be of any benefit to the residents of the facility, but rather appeared to be personal use expenses by the Administrator, including Cozy Brown (a restaurant in Mobile, AL), Wendy's in Mobile, AL, McDonald's in Mobile, AL, Waffle House in Mobile, AL, Golden Corral in Mobile, AL, NT Lingerie in Mobile, AL, and Talquin Electric (a utility provider for Gadsden, Leon, Liberty, and Wakulla counties of Florida, although the facility itself is located in Holmes county). (Photographic evidence was obtained.)

Per the facility's "Account History" for to , electronic deposits were:
SSA $810.00
SSA $1,013.00
SSI $967.00
SSI $177.00

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{A 123}	Continued From page 8 SSI $30.00 SSI $967.00 SSI $967.00 HCCLAIM $3,750.00 HCCLAIM $6,250 The to account history expenditures (which appeared to be personal and not business related) included, but were not limited to: - Cozy Brown restaurant Mobile, AL $49.48 - Wendy's Mobile $11.76 - McDonald's Mobile $16.46 - Waffle House Mobile, AL $37.52 - NT Lingerie Mobile, AL $30.95 - Cozy Brown restaurant Mobile $40.90 - Cozy Brown restaurant Mobile $37.18 - Talquin Electric $320.81 (does not provide services in Holmes County where facility is located) - Waffle House $30.25 - Golden Corral Mobile, AL $150.52 - Waffle House Mobile, AL $58.00 A record review of facility receipts provided by the Administrator included, but were not limited to: A receipt dated for Rainbow, a clothing store in Mobile, AL, with a note stating "Resident clothes" A receipt dated for Big Lots in Saraland, AL, with a note stating "Self-care supply for residents" The receipts did not indicate which residents received these items. (Photographic evidence was obtained.) On at approximately 12:00 PM, an interview was conducted with the Administrator, who stated she receives monthly SSI electronic	{A 123}		

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{A 123}	Continued From page 9 deposits into the facility's bank account for Resident #6 in the amount of $967, Resident #9 in the amount of $810, Resident #12 in the amount of $967, Resident #13 in the amount of $967, Resident #14 in the amount of $1,013. She stated Resident # 8 receives a monthly (, , ,) electronic deposit into the facility's bank account in the amount of $199. The Administrator stated Resident #7 self pays $841, Resident #10 self pays $1,200 per month, Resident #11 self pays $1,500 per month, and Resident #15 self pays $1,500 per month and those payments are deposited into the facility's business account. The Administrator stated she receives no payments from Residents #16, 17, 18, or 19. She stated she does not receive Resident #5's payment while the resident is in the , , facility. The Administrator stated the facility's bills are paid from the same account that resident funds are deposited in. She stated she uses the facility account for personal expenses towards her monthly salary. No documentation for a separate resident account was received. On at approximately 9:45 AM, an interview was conducted with the Administrator, who stated the expenditures for Wendy's, McDonald's, Cozy Brown, Waffle House, Golden Corral, NT Lingerie, and Talquin Electric were for personal expenses she deducts from her monthly salary. Class II	{A 123}		