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
	AL11969886	A. BUILDING: _____ B. WING _____	R 05/22/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALBA COURT RESIDENCES	115 WASHINGTON ST NEW SMYRNA BEACH, FL 32168

(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
{ZZ875}	430.5025(4 & 7-9) Alzheimer disease/dementia; Training (4) Employees of covered providers must complete the following training for Alzheimer's disease and related forms of dementia: (a) Upon beginning employment, each employee must receive basic written information about interacting with persons who have Alzheimer's disease or related forms of dementia. (b) Within 30 days after beginning employment, each employee who provides personal care to or has regular contact with participants, patients, or residents must complete a 1-hour training program provided by the department. 1. The department shall provide training that is available online at no cost. The 1-hour training program shall contain information on understanding the basics about the most common forms of dementia, how to identify the signs and symptoms of dementia, and skills for communicating and interacting with persons with Alzheimer ' s disease or related forms of dementia. A record of the completion of the training program must be made available to the covered provider which identifies the training curricula, the name of the employee, and the date of completion. 2. A covered provider must maintain a record of the employee's completion of the training program and, upon written request of the employee, provide the employee with a copy of the record of completion consistent with the employer's written policies. 3. An employee who has completed the training required in this subsection is not required to repeat the program upon changing employment to a different covered provider. (c) Within 7 months after beginning employment for a home health agency, nurse registry, or companion or homemaker service provider, each	{ZZ875}		

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{ZZ875}	Continued From page 1	{ZZ875}		

employee who provides personal care must complete 2 hours of training in addition to the training required in paragraphs (a) and (b). The additional training must include, but is not limited to, behavior management, promoting the person ' s independence in activities of daily living, and skills in working with families and caregivers.
(d) Within 7 months after beginning employment for a nursing home, an assisted living facility, an adult family-care home, or an adult day care center, each employee who provides personal care must complete 3 hours of training in addition to the training required in paragraphs (a) and (b). The additional training must include, but is not limited to, behavior management, promoting the person's independence in activities of daily living, skills in working with families and caregivers, group and individual activities, maintaining an appropriate environment, and ethical issues.
(e) For an assisted living facility, adult family-care home, or adult day care center that advertises and provides, or is designated to provide, specialized care for persons with Alzheimer's disease or related forms of dementia, in addition to the training specified in paragraphs (a) and (b), employees must receive the following training:
1. Within 3 months after beginning employment, each employee who provides personal care to or has regular contact with the residents or participants must complete the additional 3 hours of training as provided in paragraph (d).
2. Within 6 months after beginning employment, each employee who provides personal care must complete an additional 4 hours of dementia-specific training. Such training must include, but is not limited to, understanding Alzheimer's disease and related forms of dementia, the stages of Alzheimer's disease, communication strategies, medical information,

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{ZZ875}	Continued From page 2 and stress management. 3. Thereafter, each employee who provides personal care must participate in at least 4 hours of continuing education each calendar year through contact hours, on-the-job training, or electronic learning technology. For this subparagraph, the term "on-the-job training" means a form of direct coaching in which a facility administrator or his or her designee instructs an employee who provides personal care with guidance, support, or hands-on experience to help develop and refine the employee's skills for caring for a person with Alzheimer's disease or a related form of dementia. The continuing education must cover at least one of the topics included in the dementia-specific training in which the employee has not received previous training in the previous calendar year. The continuing education may be fulfilled and documented in a minimum of one quarter-hour increments through on-the-job training of the employee by a facility administrator or his or her designee or by an electronic learning technology chosen by the facility administrator. On-the-job training may not account for more than 2 hours of continuing education each calendar year. (f)1. An employee provided, assigned, or referred by a health care services pool must complete the training required in paragraph (c), paragraph (d), or paragraph (e) that is applicable to the covered provider and the position in which the employee will be working. The documentation verifying the completed training and continuing education of the employee, if applicable, must be provided to the covered provider upon request. 2. A health care services pool must verify and maintain documentation as required under s. 400.980(5) before providing, assigning, or referring an employee to a covered provider.	{ZZ875}		

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{ZZ875}	Continued From page 3 (7) For a certified nursing assistant as defined in s. 464.201, training hours completed as required under this section may count toward the total hours of training required to maintain certification as a nursing assistant. (8) For a health care practitioner as defined in s. 456.001, training hours completed as required under this section may count toward the total hours of continuing education required by that practitioner's licensing board. (9) Each person employed, contracted, or referred to provide services before July 1, 2023, must complete the training required in this section before July 1, 2026. Proof of completion of equivalent training completed before July 1, 2023, shall substitute for the training required in subsection (4). Each person employed, contracted, or referred to provide services on or after July 1, 2023, may complete training using approved curriculum under paragraph (5)(d) until the effective date of the rules adopted by the department under subsection (6). This Statute or Rule is not met as evidenced by: Based on record review and staff interview, the facility failed to ensure 2 of 3 employees reviewed, Employee B and C, received the 1 hour video Alzheimer's training provided by the Department of Elder Affairs within 30 days of employment, failed to complete the additional 3 hours of Alzheimer's training within 3 months of employment, and the additional 4 hours of training required within 6 months of hire. Employee B and C also failed to receive the four hours of continuing education annually. The findings include: Record review of the employee file for Employee	{ZZ875}		

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{ZZ875}	Continued From page 4 B, hired 1/9/2025, found no evidence Employee B received the required Alzheimer's training. The only training in the employee file was a 4-hour training on Alzheimer's and related disorders on 3/1/2023 and a 4-hour Level II Alzheimer's training on 3/1/2023. Record review of the employee file for Employee C, hired 7/3/2024 found no evidence that the employee had any Alzheimer's training. During an interview with the Administrator on 5/18/2026 at 3:35 PM, she was notified evidence of the training was missing from Employee B's and Employee C's employee file. During further interview with the Administrator on 5/19/2026 at 9:23AM she was reminded evidence of the training was still needed. During an interview with the Resident Care Coordinator (RCC) on 5/19/2026 at 10:30 AM, she was notified evidence of the training was missing from both employee files. During further interview with the RCC on 5/19/2026 at 1:40 PM, she stated she could not locate evidence of training for Employee B and C. Class III	{ZZ875}		
{A 000}	Initial Comments A revisit was conducted to a standard survey at Alba Court Residences on May 18, 2026 through May 22, 2026. There remained outstanding deficiencies at the time of the survey.	{A 000}		
{A 081}	429.52(1 & 7) FS; 59A-36.011(2-3) FAC Training - Staff In-Service	{A 081}		

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{A 081}	Continued From page 5 429.52 (1)(a) Each new assisted living facility employee who has not previously completed core training must attend a preservice orientation provided by the facility before interacting with residents. The preservice orientation must be at least 2 hours in duration and cover topics that help the employee provide responsible care and respond to the needs of facility residents. Upon completion, the employee and the administrator of the facility must sign a statement that the employee completed the required preservice orientation. The facility must keep the signed statement in the employee ' s personnel record. (b) Each assisted living facility employee must complete the training required under s. 430.5025. However, an employee of an assisted living facility licensed as a limited mental health facility under s. 429.075 is exempt from the training requirements under s. 430.5025(4)(d). (c) If an assisted living facility employee completes the 1-hour training required under s. 430.5025 before interacting with residents, such training may count toward the 2 hours of preservice orientation required under paragraph (a). (7) Facility staff shall participate in inservice training relevant to their job duties as specified by agency rule. Topics covered during the preservice orientation are not required to be repeated during inservice training. A single certificate of completion that covers all required inservice training topics may be issued to a participating staff member if the training is provided in a single training course. 59A-36.011	{A 081}		

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{A 081}	Continued From page 6 (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 infection control, including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use its infection control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to blood borne pathogens, may be used to meet this requirement. (b) Staff who provide direct care to residents must receive a minimum of 1 hour in-service	{A 081}		

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{A 081}	Continued From page 7	{A 081}		

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 abuse, neglect, and exploitation. The facility must use its abuse 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 and procedures.
2. All facility staff shall demonstrate an understanding and competency in the

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{A 081}	Continued From page 8 implementation of the elopement response policies and procedures. This Statute or Rule is not met as evidenced by: Based on employee record review and staff interview, the facility failed to ensure 1 of 3 employees reviewed, Employee C, received preservice orientation of at least 2 hours prior to interacting with residents, received training in infection control, incident reporting, emergency procedures, resident behavior and needs, safe food handling and in providing assistance with daily living within 30 days of employment. The findings include: Record review for Employee C, hired 7/3/2024 found no evidence the facility provided preservice orientation of at least 2 hours, infection control training, incident reporting training, emergency procedures training, infection control training, resident behavior and needs training, providing assistance with activities of daily living training, and safe food handling training. During an interview with the Administrator on 5/18/2026 at 3:35 PM, she was notified evidence of the training was missing from Employee C's file. During further interview with the Administrator on 5/19/2026 at 9:23AM she was reminded evidence of the training was still needed. During an interview with the Resident Care Coordinator (RCC) on 5/19/2026 at 10:30 AM,	{A 081}		

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{A 081}	Continued From page 9 she was notified evidence of the training was missing from the employee file. During further interview with the RCC on 5/19/2026 at 1:40 PM, she stated she could not locate evidence of training for Employee C. Class III	{A 081}		
{A 082}	59A-36.011(4) FAC Training - HIV/AIDS (4) HUMAN IMMUNODEFICIENCY VIRUS/ACQUIRED IMMUNE DEFICIENCY SYNDROME (HIV/AIDS). 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 HIV and AIDS, 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 employee record review and staff interview, the facility failed to ensure that 1 of 3 employees reviewed received training in Human Immunodeficiency/Acquired immune Deficiency Syndrome (HIV/AIDS) within 30 days of employment. (Employee) The findings include: Record review for Employee C, hired 7/3/2024, found no evidence the employee received training in HIV/AIDS. During an interview with the Administrator on	{A 082}		

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{A 082}	Continued From page 10 5/18/2026 at 3:35 PM, she was notified evidence of the training was missing from Employee C's file. During further interview with the Administrator on 5/19/2026 at 9:23AM she was reminded evidence of the training was still needed. During an interview with the Resident Care Coordinator (RCC) on 5/19/2026 at 10:30 AM, she was notified evidence of the training was missing from the employee file. During further interview with the RCC on 5/19/2026 at 1:40 PM, she stated she could not locate evidence of training for Employee C. Class III	{A 082}		
{A 090}	59A-36.011(11) FAC Training - Do Not Resuscitate Orders (11) DO NOT RESUSCITATE ORDERS TRAINING. (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 Do Not Resuscitate Orders. (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 DNROs within 30 days after employment. (c) Training shall consist of the information included in rule 59A-36.009, F.A.C. This Statute or Rule is not met as evidenced by: Based on employee record review and staff interview, the facility failed to ensure 1 of 3	{A 090}		

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{A 090}	Continued From page 11 sampled employees received training of at least one hour of training in the facility's policies and procedures regarding Do Not Resuscitate Orders (DNROs) within 30 days after employment. (Employee C) The findings include: Record review for Employee C, hired 7/3/2024, found no evidence Employee C received training in the facility's policies and procedures regarding DNRO's. During an interview with the Administrator on 5/18/2026 at 3:35 PM, she was notified evidence of the training was missing from Employee C's file. During further interview with the Administrator on 5/19/2026 at 9:23AM she was reminded evidence of the training was still needed. During an interview with the Resident Care Coordinator (RCC) on 5/19/2026 at 10:30 AM, she was notified evidence of the training was missing from the employee file. During further interview with the RCC on 5/19/2026 at 1:40 PM, she stated she could not locate evidence of training for Employee C. Class III	{A 090}		