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 |
|---|---|---|---|
| | AL11953284 | A. BUILDING: _____ B. WING _____ | 08/26/2026 |

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| ANSLEY COURT LLC | 1301 W. MAITLAND BLVD MAITLAND, FL 32751 |

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| A 000 | Initial Comments<br><br>A Complaint Investigation #2026011426 and a generator monitoring was conducted at Ansley Court LLC. Assisted Living Facility on . The facility had deficiencies at the time of the survey visit. | A 000 | | |
| A 077 SS=D | 429.176 FS; 429.52( ),59A-36.01(1) FAC Staffing Standards - Administrators<br><br>429.176 Notice of change of administrator.-If, during the period for which a license is issued, the owner changes administrators, the owner must notify the agency of the change within 10 days and provide documentation within 90 days that the new administrator meets educational requirements and has completed the applicable core educational requirements under s. 429.52. A facility may not be operated for more than 120 consecutive days without an administrator who has completed the core educational requirements.<br><br>429.52<br>(4) A facility administrator must complete the required core training, including the competency test, within 90 days after the date of employment as an administrator. Failure to do so is a violation of this part and subjects the violator to an administrative fine as prescribed in s. 429.19. Administrators licensed in accordance with part II of chapter 468 are exempt from this requirement. Other licensed professionals may be exempted, as determined by the agency by rule.<br>(5) Administrators are required to participate in continuing education for a minimum of 12 contact hours every 2 years.<br><br>59A-36.010<br>(1) ADMINISTRATORS. Every facility must be | A 077 | | |

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| A 077 | Continued From page 1<br>under the supervision of an administrator who is responsible for the operation and maintenance of the facility including the management of all staff and the provision of appropriate care to all residents as required by chapters 408, part II, 429, part I, F.S., and rule chapter 59A-35, F.A.C., and this rule chapter.<br>(a) An administrator must:<br>1. Be at least ;<br>2. If employed on or after , have, at a minimum, a high school diploma or G.E.D.;<br>3. Be in compliance with Level 2 background screening requirements pursuant to sections 408.809 and 429.174, F.S.;<br>4. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C., no later than 90 days after becoming employed as a facility administrator. Administrators who attended core training prior to , are not required to take the competency test unless specified elsewhere in this rule; and,<br>5. Satisfy the continuing education requirements pursuant to rule 59A-36.011, F.A.C. Administrators who are not in compliance with these requirements must retake the core training and core competency test requirements in effect on the date the non-compliance is discovered by the agency or the department.<br>(b) In the event of extenuating circumstances, such as the of a facility administrator, the agency may permit an individual who otherwise has not satisfied the training requirements of subparagraph (1)(a)4. of this rule, to temporarily serve as the facility administrator for a period not to exceed 90 days. During the 90 day period, the individual temporarily serving as facility administrator must: | A 077 | | |

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| A 077 | Continued From page 2<br>1. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C.; and,<br>2. Complete all additional training requirements if the facility maintains licensure as an extended congregate care or limited mental health facility.<br>(c) Administrators may supervise a maximum of either three assisted living facilities or a group of facilities on a single campus providing housing and health care Administrators who supervise more than one facility must appoint in writing a separate manager for each facility. However, an administrator supervising a maximum of three assisted living facilities, each licensed for 16 or fewer beds and all within a 15 mile of each other, is only required to appoint two managers to assist in the operation and maintenance of those facilities.<br>(d) An individual serving as a manager must satisfy the same qualifications, background screening, core training and competency test requirements, and continuing education requirements as an administrator pursuant to paragraph (1)(a) of this rule. Managers who attended the core training program prior to , , are not required to take the competency test unless specified elsewhere in this rule. In addition, a manager may not serve as a manager of more than a single facility, except as provided in paragraph (1)(c) of this rule, and may not , serve as an administrator of any other facility.<br>(e) Pursuant to section 429.176, F.S., facility owners must notify the Agency Central Office within 10 days of a change in facility administrator on the Notification of Change of Administrator form, AHCA Form 3180-1006, , which is incorporated by reference and available online at: | A 077 | | |

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| A 077 | Continued From page 3<br><br>http://www.flrules.org/Gateway/reference.asp?No=Ref-09393.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on review of the facility's documentation and interview, the facility failed to notify the agency by submitting a notice of change of Administrator Form, AHCA Form 3180-1006 within 10 days and providing supporting documentation within 90 days to ensure that the Administrator meets the requirements overseeing an assisted living facility.<br><br>Findings:<br><br>A review of the incomplete change of Administrator Form, AHCA Form 3180-1006 provided by the Administrator with a copy of her Nursing Home Administrator's license #NH7593 expires . This Administrator was not updated and not listed on the AHCA website portal, still listed the previous Administrator when verified on at 8:30 AM.<br><br>On at 11:30 AM, an interview with the Administrator confirmed that she had been employed at this facility since and the corporate office sent in the change of Administrator form to the agency in , and did not have that documentation. Furthermore, the Administrator said that she oversees both the Assisted Living Facility and the Skilled Nursing Home and Rehabilitation that's located on the same campus. The Administrator confirmed the findings.<br><br>(Photographic Evidence Obtained) | A 077 | | |

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| A 077 | Continued From page 4<br>Class III | A 077 | | |
| A 152 SS=D | 59A-36.014(3) FAC Physical Plant - Safe Living Environ/Other<br><br>(3) OTHER REQUIREMENTS.<br>(a) All facilities must:<br>1. Provide a safe living environment pursuant to section 429.28(1)(a), F.S.;<br>2. Be maintained free of hazards; and,<br>3. Ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order.<br>(b) Pursuant to section 429.27, F.S., residents must be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident bedroom or sleeping area must have at least the following furnishings:<br>1. A clean, comfortable bed with a mattress no less than 36 inches wide and 72 inches long, with the top surface of the mattress at a comfortable to ensure easy access by the resident,<br>2. A closet or wardrobe space for hanging clothes,<br>3. A dresser, or other furniture designed for storage of clothing or personal effects,<br>4. A table or nightstand, bedside lamp or floor lamp, and waste basket; and,<br>5. A comfortable chair, if requested.<br>(c) The facility must maintain master or duplicate keys to resident bedrooms to be used in the event of an emergency.<br>(d) Residents who use portable bedside commodes must be provided with privacy during use.<br>(e) Facilities must make available linens and personal laundry services for residents who | A 152 | | |

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| A 152 | Continued From page 5<br><br>require such services. Linens provided by a facility must be free of tears, stains and must not be .<br><br>This Statute or Rule is not met as evidenced by:<br>Based on observation and interview, the facility failed to maintain a timely repair for one of the broken elevators as required.<br><br>Findings:<br><br>An observation on at 11:55 AM, there was only one elevator operating instead of the two elevators working on opposite side of the Assisted Living Facility.<br><br>On at 12:10 PM, about 5 residents in the common living room area were overheard complaining among each other saying they wish the other elevator was working and hopefully it will work soon. They further discussed that it was hard for some of them because living on the second floor they have to walk or wheelchair to the other end of hallway to the working elevator. They want the elevator to work.<br><br>On at 1:02 PM, an interview with the Lead Maintenance Assistant confirmed that the elevator had been down about a week, waiting for parts to be delivered hopefully by next week. He said that he would call the company and follow up today for estimate time of delivery next week.<br><br>On at 3:30 PM, an interview with the Administrator confirmed the findings and said that she will get the elevator working as soon as possible and will expedite a call to the company to deliver the parts.<br><br>(Photographic Evidence Obtained) | A 152 | | |

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| A 152 | Continued From page 6<br><br>Class III | A 152 | | |
| A 162 SS=D | 59A-36.015(3) FAC Records - Resident<br><br>(3) RESIDENT RECORDS. Resident records must be maintained on the premises and include:<br>(a) Resident demographic data as follows:<br>1. Name,<br>2. ,<br>3. Race,<br>4. Date of birth,<br>5. Place of birth, if known,<br>6. Social security number,<br>7. Medicaid and/or Medicare number, or name of other health insurance ,<br>8. Name, address, and telephone number of next of kin, legal representative, or individual designated by the resident for notification in case of an emergency; and,<br>9. Name, address, and telephone number of the resident's health care practioner and case manager, if applicable.<br>(b) A copy of the Resident Health Assessment form, AHCA Form 1823 or the health care practitioner's medical examination form described in Rule 59A-36.006, F.A.C.<br>(c) Any orders for medications, nursing services, therapeutic diets, , or other services to be provided, supervised, or implemented by the facility that require a health care provider's order.<br>(d) Documentation of a resident's refusal of a therapeutic diet pursuant to Rule 59A-36.012, F.A.C., if applicable.<br>(e) The resident care record described in paragraph 59A-36.007(1)(f), F.A.C.<br>(f) A ˬ record that is initiated on admission. Information may be taken from AHCA Form 1823 | A 162 | | |

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| A 162 | Continued From page 7<br>or the resident's health assessment. Residents receiving assistance with the activities of daily living must have their ◡ recorded semi-annually. This subsection does not apply to residents who are receiving licensed hospice services when such residents, their representatives, or their physicians request in writing that ◡ not be taken.<br>(g) For facilities that will have unlicensed staff assisting the resident with the self-administration of medication, a copy of the written informed consent described in Rule 59A-36.006, F.A.C., if such consent is not included in the resident's contract.<br>(h) For facilities that manage a pill organizer, assist with self-administration of medications or administer medications for a resident, copies of the required medication records maintained pursuant to Rule 59A-36.008, F.A.C.<br>(i) A copy of the resident's contract with the facility, including any addendums to the contract as described in Rule 59A-36.018, F.A.C.<br>(j) For a facility whose owner, administrator, staff, or representative thereof, serves as an attorney in fact for a resident, a copy of the monthly written statement of any transaction made on behalf of the resident as required in Section 429.27, F.S.<br>(k) For any facility that maintains a separate trust fund to receive funds or other property belonging to or due a resident, a copy of the quarterly written statement of funds or other property disbursed as required in Section 429.27, F.S.<br>(l) If the resident is an recipient, a copy of the Department of Children and Families form Alternate Care Certification for , . , ( ), CF-ES 1006, , which is hereby incorporated by reference and available for review at: http://www.flrules.org/Gateway/reference.asp?No | A 162 | | |

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| A 162 | Continued From page 8<br><br>=Ref-04004. The absence of this form will not be the basis for administrative action against a facility if the facility can demonstrate that it has made a good faith effort to obtain the required documentation from the Department of Children and Families.<br>(m) Documentation of the , , of a health care surrogate, health care proxy, guardian, or the existence of a power of attorney, where applicable.<br>(n) For hospice patients, the interdisciplinary care plan and other documentation that the resident is a hospice patient as required in Rule 59A-36.006, F.A.C.<br>(o) The resident's , DH Form 1896, if applicable.<br>(p) For independent living residents who receive meals and occupy beds included within the licensed capacity of an assisted living facility, but who are not receiving any personal, limited nursing, or extended congregate care services, record keeping may be limited to a log listing the names of residents participating in this arrangement.<br>(q) Except for resident contracts, which must be retained for 5 years, all resident records must be retained for 2 years following the departure of a resident from the facility unless it is required by contract to retain the records for a longer period of time. Upon request, residents must be provided with a copy of their records upon departure from the facility.<br>(r) Additional resident records requirements for facilities holding a limited mental health, extended congregate care, or limited nursing services license are provided in Rules 59A-36.020, 59A-36.021 and 59A-36.022, F.A.C., respectively.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on review of the facility's documentation | A 162 | | |

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| A 162 | Continued From page 9<br><br>and interview, the facility failed to ensure to has access and availability for all billing data records are maintained onsite as required.<br><br>Findings:<br><br>A review and access to resident's contractual billing amount and billing authorization when receiving third party payment funding such as Long-Term Medicaid providers.<br><br>The billing data records were not available and were not working during the survey on to review accuracy of all billing ledgers.<br><br>On at 2:32 PM, a telephone interview with the Billing , (Owner's sister) confirmed that since the Change of Ownership that occurred in that she has been managing all billing data records on QuickBooks and was not available at the facility. The facility did not have a billing system onsite yet. She further stated that she had trouble with billing Medicaid due to all the changes made 20 years ago when she last billed for Medicaid at a previous employer. The Billing , said that she will work on getting access at the facility for the Business Office personnel to review.<br><br>Class III | A 162 | | |