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 |
|---|---|---|---|
| | AL11964696 | A. BUILDING: _____ B. WING _____ | 02/01/2024 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| OSPREY VILLAGE AT AMELIA ISLAND | 76 OSPREY VILLAGE DRIVE FERNANDINA BEACH, FL 32034 |

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| A 161 | 429.275(2) FS; 59A-36.015(2) FAC Records - Staff<br><br>429.275<br>(2) The administrator or owner of a facility shall maintain personnel records for each staff member which contain, at a minimum, documentation of background screening, if applicable, documentation of compliance with all training requirements of this part or applicable rule, and a copy of all licenses or certification held by each staff who performs services for which licensure or certification is required under this part or rule.<br><br>59A-36.015<br>(2) STAFF RECORDS.<br>(a) Personnel records for each staff member must contain, at a minimum, a copy of the employment application, with references furnished, and documentation verifying freedom from signs or symptoms of communicable disease. In addition, records must contain the following, as applicable:<br>1. Documentation of compliance with all staff training and continuing education required by Rule 59A-36.011, F.A.C.,<br>2. Copies of all licenses or certifications for all staff providing services that require licensing or certification,<br>3. Documentation of compliance with level 2 background screening for all staff subject to screening requirements as specified in Section 429.174, F.S., and Rule 59A-36.010, F.A.C.,<br>4. For facilities with a licensed capacity of 17 or more residents, a copy of the job description given to each staff member pursuant to Rule 59A-36.010, F.A.C.,<br>5. Documentation verifying direct care staff and administrator participation in resident elopement drills pursuant to paragraph 59A-36.007(8)(c), | A 161 | | |

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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| A 161 | Continued From page 1<br><br>F.A.C.<br>(b) The facility is not required to maintain personnel records for staff provided by a licensed staffing agency or staff employed by an entity contracting to provide direct or indirect services to residents and the facility. However, the facility must maintain a copy of the contract between the facility and the staffing agency or contractor as described in Rule 59A-36.010, F.A.C.<br>(c) The facility must maintain the written work schedules and staff time sheets for the most current 6 months as required by Rule 59A-36.010, F.A.C.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on interview and record review, the facility failed to ensure an application and employment reference checks were completed for 1 of 3 sampled employees, Employee C.<br><br>The findings include:<br><br>Review of the record for Employee C revealed she was hired as a certified nursing assistant/caregiver on 11/10/23. The employee's file lacked documented evidence of an employment application or employment reference checks.<br><br>During an interview with the Administrator on 02/01/24 at 4:43 PM and on 02/01/24 at 4:52 PM, she reported the facility had no record of an application and employment reference checks for Employee C.<br><br>Class III | A 161 | | |

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| A 000 | Continued From page 2 | A 000 | | |
| A 000 | Initial Comments<br><br>An abbreviated relicensure survey with Extended Congregate Care monitoring and a complaint investigation (#2022007294) was conducted at Osprey Village at Amelia Island on 2/1/2024. Deficient practice was identified at the time of the survey. | A 000 | | |
| A 009 | 59A-36.006(3) FAC; 400.0078(2) Admissions - Admission Package<br><br>(3) ADMISSION PACKAGE.<br>(a) The facility must make available to potential residents a written statement(s) that includes the following information listed below. Providing a copy of the facility resident contract or facility brochure containing all the required information meets this requirement.<br>1. The facility's admission and continued residency criteria;<br>2. The daily, weekly or monthly charge to reside in the facility and the services, supplies, and accommodations provided by the facility for that rate;<br>3. Personal care services that the facility is prepared to provide to residents and additional costs to the resident, if any;<br>4. Nursing services that the facility is prepared to provide to residents and additional costs to the resident, if any;<br>5. Food service and the ability of the facility to accommodate special diets;<br>6. The availability of transportation and additional costs to the resident, if any;<br>7. Any other special services that are provided by the facility and additional cost if any;<br>8. Social and leisure activities generally offered by the facility; | A 009 | | |

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| A 009 | Continued From page 3<br><br>9. Any services that the facility does not provide but will arrange for the resident and additional cost, if any;<br>10. The facility rules and regulations that residents must follow as described in Rule 59A-36.007, F.A.C.;<br>11. The facility policy concerning Do Not Resuscitate Orders pursuant to Section 429.255, F.S., and Rule 59A-36.009, F.A.C., and Advance Directives pursuant to Chapter 765, F.S.;<br>12. If the facility is licensed to provide extended congregate care, the facility's residency criteria for residents receiving extended congregate care services. The facility must also provide a description of the additional personal, supportive, and nursing services provided by the facility including additional costs and any limitations on where extended congregate care residents may reside based on the policies and procedures described in Rule 59A-36.021, F.A.C.;<br>13. If the facility advertises that it provides special care for individuals with Alzheimer's disease and related disorders, a written description of those special services as required in Section 429.177, F.S.; and,<br>14. The facility's resident elopement response policies and procedures.<br>(b) Before or at the time of admission, the resident, or the resident's responsible party, guardian, or attorney-in-fact, if applicable, must be provided with the following:<br>1. A copy of the resident's contract that meets the requirements of Rule 59A-36.018, F.A.C.,<br>2. A copy of the facility statement described in paragraph (a) of this subsection, if one has not already been provided,<br>3. A copy of the resident's bill of rights as required by Rule 59A-36.007, F.A.C.; and,<br>4. A Long-Term Care Ombudsman Program | A 009 | | |

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| A 009 | Continued From page 4<br><br>brochure that includes the telephone number and address of the district office.<br>(c) Documents required by this subsection must be in English. If the resident is not able to read, or does not understand English and translated documents are not available, the facility must explain its policies to a family member or friend of the resident or another individual who can communicate the information to the resident.<br><br>400.0078<br>(2) Upon admission to a long-term care facility, each resident or representative of a resident must receive information regarding:<br>(a) The purpose of the State Long-Term Care Ombudsman Program.<br>(b) The statewide toll-free telephone number and e-mail address for receiving complaints.<br>(c) Information that retaliatory action cannot be taken against a resident for presenting grievances or for exercising any other resident right.<br>(d) Other relevant information regarding how to contact representatives of the State Long-Term Care Ombudsman Program.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on review of the admission's contract and interview with the Administrator, the facility failed to include a 45 day notice for discharge for 1 of 1 resident reviewed (Resident #4).<br><br>The findings include:<br><br>A medical record review was conducted for Resident #1 which showed an admission date of 12/20/23. The admissions contract noted if termination by the company was decided, the community would give the resident a 30 day | A 009 | | |

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| A 009 | Continued From page 5<br><br>notice of the termination date with justification for the determination.<br><br>An interview was conducted with the Administrator on 2/1/24 at 1:35 p.m.. She reported the contract stated a 30 day notice for termination would be given, and she would have to call corporate to change it. She confirmed knowledge of the requirement 45 day notice of termination.<br><br>Class III | A 009 | | |
| A 078 | 59A-36.010(2) FAC Staffing Standards - Staff<br><br>(2) STAFF.<br>(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 disease. 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 or ownership.<br>1. Evidence of a negative tuberculosis 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 tuberculosis testing materials satisfies the annual tuberculosis examination requirement. An individual with a positive tuberculosis test must submit a health care provider's statement that the individual does not constitute a risk of communicating tuberculosis. | A 078 | | |

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| A 078 | Continued From page 6<br>2. If any staff member has, or is suspected of having, a communicable disease, 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 disease.<br>(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.<br>(c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C.<br>(d) An assisted living facility contracting 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 specifically describe the services the staffing agency or contractor will provide to residents.<br>(e) For facilities with a licensed capacity of 17 or more residents, the facility must:<br>1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and,<br>2. Maintain time sheets for all staff.<br>(f) Level 2 background screening must be conducted for staff, including staff contracted by the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S. | A 078 | | |

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| A 078 | Continued From page 7<br><br>This Statute or Rule is not met as evidenced by:<br>Based on interview and record review, the facility failed to ensure Tuberculosis (TB) testing, and a statement from a medical provider noting an employee was free of communicable disease prior to providing direct care for residents, was obtained for 1 of 3 sampled employees, Employee C.<br><br>The findings include:<br><br>Review of the record for Employee C revealed she was hired as a certified nursing assistant/caregiver on 11/10/23. The employee's file lacked documented evidence of a TB test and statement from a medical provider noting the employee was free of communicable disease.<br><br>An interview with the Administrator was conducted on 02/01/24 at 4:43 PM and on 02/01/24 at 4:52 PM. The Administrator reported the facility had no record of a TB test and statement from a medical provider noting the employee was free of communicable disease.<br><br>Class III | A 078 | | |