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
	AL11911741	A. BUILDING: _____ B. WING _____	02/17/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ARBOR GLEN ARBOR TRACE	1000 ARBOR LAKE DRIVE NAPLES, FL 34110

(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 biennial, extended congregate care, limited nursing services, and emergency power plan monitoring survey was conducted on [redacted] at Arbor Glen Arbor Trace, an assisted living facility in Naples, Florida. The following is description of the deficiencies.	A 000		
A 081	59A-36.011( ) FAC Training - Staff In-Service (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 [redacted] control, including universal precautions and facility	A 081		

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A 081	Continued From page 1 sanitation procedures, before providing personal care to residents. The facility must use its [illegible] control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to borne [illegible], may be used to meet this requirement. (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: 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 [illegible], neglect, and , . The facility must use its [illegible] 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	A 081		

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A 081	Continued From page 2 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 implementation of the elopement response policies and procedures. This Statute or Rule is not met as evidenced by: Based on record review and staff interview, the facility failed to have staff trainings for 2 (Staff A and Staff B) of 4 staff files reviewed. The findings included: Record review on ... ... at 1:30 p.m., showed Staff B with a hire date of . Staff B was missing Activities of Daily Living and Behavioral Needs, Elopement Response, Reporting Major Incidents, Reporting Adverse Incidents, Facility Emergency Procedures, Incident Reporting; Nutrition and Safe Food Handling training. Record review on ... ... at 2:00 p.m., showed Staff A with a hire date of . Staff A was missing Activities of Daily Living and Behavioral Needs, Elopement Response, Reporting Major Incidents, Reporting Adverse Incidents, Facility Emergency Procedures and Incident Reporting training. In an interview on at 2:30 p.m., the Director of Nursing said she could not locate the trainings.	A 081		

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A 081	Continued From page 3 Class III	A 081		
A 082	59A-36.011(4) FAC Training - / (4) / (/). 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. This Statute or Rule is not met as evidenced by: Based on record review and staff interview, the facility failed to have documented training for 1 (Staff A) of 4 staff records reviewed for training. The findings included: Record review on at 2:00 p.m., showed Staff A with a hire date of . There was no / (/) training on file. Interview on at 2:30 p.m., the Director of Nursing said she was unable to locate the training. Class III	A 082		

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A 090	Continued From page 4	A 090		
A 090	59A-36.011(11) FAC Training -	A 090		

(11)
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
(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.
(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 record review and staff interview, the facility failed to have documented training for 1 (Staff A) of 4 staff records reviewed for training.

The findings included:

Record review on at 2:00 p.m., showed Staff A with a hire date of . There was no ( ) training on file.

Interview on at 2:30 p.m., the Director of Nursing said she was unable to locate the training.

Class III

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CZ814	Continued From page 5	CZ814		
CZ814	435.12(2)(b-d), FS Background Screening Clearinghouse 435.12(2) Care Provider Background Screening Clearinghouse.- (b) Until such time as the [illegible] are enrolled in the national retained print [illegible] 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. (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. (d) An employer must register with and initiate all criminal history checks through the clearinghouse before referring an employee or potential employee for electronic [illegible] 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; [illegible]; and race. Individuals, persons, applicants, and controlling interests that cannot legally obtain a social security number must provide an individual taxpayer identification number. This Statute or Rule is not met as evidenced by: Based on record review and staff interview, the facility failed to add 6 (Executive Director, Staff A, Staff B, Staff C, Staff D and Staff F) of 6 staff records reviewed to the employee roster within 10 business days of hire.	CZ814		

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CZ814	Continued From page 6 The findings included: Record review on ... ... at 1:00 p.m., showed the Executive Director with a hire date of . The Executive Director was not added to the employee roster within 10 business days. Record review on at 1:00 p.m., showed Staff A with a hire date of .. .. Staff A was not added to the employee roster within 10 business days. Record review on ... ... at 1:00 p.m., showed Staff B with a hire date of . Staff B was not added to the employee roster within 10 business days. Record review on at 1:00 p.m., showed Staff C with a hire date of .... Staff C was not added to the employee roster within 10 business days. Record review on ... ... at 1:00 p.m., showed Staff D with a hire date of . Staff D was not added to the employee roster within 10 business days. Record review on at 1:00 p.m., showed Staff F with a hire date of .. . Staff F was not added to the employee roster within 10 business day. Interview on ... ... at 1:30 p.m., with Human Resources staff confirmed the staff were not on the employee roster. Unclassified	CZ814		