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
	AL11967498	A. BUILDING: _____ B. WING _____	06/16/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SWAN AT LAKE CONWAY ALF	3714 ST MORITZ STREET ORLANDO, FL 32812

(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 A Complaint Investigation #2020010041 was conducted on . . . . . Swan at Lake Conway had deficiencies were identified at the time of the visit.	A 000		
A 007 SS=D	429.26(11) FS; 59A-36.006(1) FAC Admissions - Criteria 429.26 (11) No resident who requires 24-hour nursing supervision, except for a resident who is an enrolled hospice patient pursuant to part . of chapter 400, shall be retained in a facility licensed under this part. 59A-36.006 (1) ADMISSION CRITERIA. (a) An individual must meet the following minimum criteria in order to be admitted to a facility holding a standard, limited nursing services, or limited mental health license: 1. Be at least . . . . . . 2. Be free from signs and symptoms of any communicable . . . . . that is likely to be transmitted to other residents or staff. An individual who has . . . . . ( ) may be admitted to a facility, provided that the individual would otherwise be eligible for admission according to this rule. 3. Be able to perform the activities of daily living, with supervision or assistance if necessary. 4. Be able to transfer, with assistance if necessary. The assistance of more than one person is permitted. 5. Be capable of taking medication, by either self-administration, assistance with self-administration, or administration of medication. a. If the resident needs assistance with	A 007		

AHCA Form 3020-0001
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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A 007	Continued From page 1	A 007		

self-administration of medication, the facility must inform the resident of the professional qualifications of facility staff who will be providing this assistance. If unlicensed staff will be providing assistance with self-administration of medication, the facility must obtain written informed consent from the resident or the resident's surrogate, guardian, or attorney-in-fact.
b. The facility may accept a resident who requires the administration of medication if the facility employs a nurse who will provide this service or the resident, or the resident's legal representative, designee, surrogate, guardian, or attorney-in-fact, contracts with a third party licensed to provide this service to the resident.
6. Not have any special dietary needs that cannot be met by the facility.
7. Not be a danger to self or others as determined by a physician, or mental health practitioner licensed under chapter 490 or 491, F.S.
8. Not require 24-hour licensed professional mental health treatment.
9. Not be bedridden.
10. Not have any [illegible] or 4 [illegible]. A resident requiring care of a [illegible] may be admitted provided that:
a. The resident either:
(I) Resides in a standard or limited nursing services licensed facility and contracts directly with a licensed home health agency or a nurse to provide care; or
(II) Resides in a limited nursing services licensed facility and care is provided by the facility pursuant to a plan of care issued by a health care provider;
b. The condition is documented in the resident's record and admission and discharge logs; and,
c. If the resident's condition fails to improve within

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A 007	Continued From page 2 30 days as documented by a health care provider, the resident must be discharged from the facility. 11. Residents admitted to standard, limited nursing services, or limited mental health licensed facilities may not require any of the following nursing services: a. airway management of any kind, except that of continuous positive airway pressure may be provided through the use of a CPAP or bipap machine; b. Assistance with , c. Monitoring of gases, d. Management of post-surgical drainage tubes and vacuum devices; e. The administration of products in the facility; or f. Treatment of surgical or , unless the surgical or and the underlying condition have been stabilized and a plan of care has been developed. The plan of care must be maintained in the resident's record. 12. In addition to the nursing services listed above, residents admitted to facilities holding only standard and/or limited mental health licenses may not require any of the following nursing services: a. , and , , performed in the facility; b. , , performed in the facility. 13. Not require 24-hour nursing supervision. 14. Not require skilled rehabilitative services as described in rule 59G-4.290, F.A.C. 15. Be appropriate for admission to the facility as determined by the facility administrator. The administrator must base the determination on: a. An assessment of the strengths, needs, and preferences of the individual; b. The medical examination report required by	A 007		

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A 007	Continued From page 3 section 429.26, F.S., and subsection (2) of this rule, if available; c. The facility's admission policy and the services the facility is prepared to provide or arrange in order to meet resident needs. Such services may not exceed the scope of the facility's license unless specified elsewhere in this rule; and, d. The ability of the facility to meet the uniform fire safety standards for assisted living facilities established in rule chapter 69A-40, F.A.C. (b) A resident who otherwise meets the admission criteria for residency in a standard licensed facility, but who requires assistance with the administration and regulation of portable [illegible] or assistance with routine [illegible] care of [illegible] site [illegible] placement, may be admitted to a facility with a standard license as long as the facility has a nurse on staff or under contract to provide the assistance or to provide training to the resident on how to perform these functions themselves. (c) Nursing staff may not provide training to unlicensed persons, as defined in section 429.256(1)(b), F.S., to perform skilled nursing services, and may not delegate the nursing services described in this section to certified nursing assistants or unlicensed persons. This provision does not restrict a resident or a resident's representative from [illegible] with a licensed third party to provide the assistance if the facility is agreeable to such an arrangement and the resident otherwise meets the criteria for admission and continued residency in a facility with a standard license. (d) An individual enrolled in and receiving hospice services may be admitted to an assisted living facility as long as the individual otherwise meets resident admission criteria. (e) Resident admission criteria for facilities	A 007		

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A 007	Continued From page 4 holding an extended congregate care license are described in rule 59A-36.021, F.A.C. This Statute or Rule is not met as evidenced by: Based on observations, record reviews and interview, the facility admitted 1 of 6 sampled residents who exceeded the admission criteria (#1). Findings: Observations made at 10:05 a.m. on . . . . . during the transfer of resident #1 from a wheelchair to her bed revealed the facility owner placed the wheelchair at an angle to the bed, removed the footrests then locked the wheels. She instructed the resident to lean towards her, she then placed both her . . . . . under the resident's under arms and then she lifted the resident out of the chair and onto the bed. The resident's were off the floor during the entirety of the transfer. At 11 a.m. on . . . . . , the owner confirmed the findings and said resident #1 had required total assistance with transferring since being admitted to the facility. Resident #1's record revealed a facility admission date of . . . . . The only 1823 health assessment form in the record indicated that she required only assistance with transferring. However, the date of the 1823 was which was greater than two years ago. A report from the discharging facility indicated that the resident required total assistance with transferring and was unable to stand up.	A 007		

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A 007	Continued From page 5 Observations made at 12 p.m. on [redacted] during a transfer of resident #1 from her bed to a wheelchair revealed the owner placed the chair next to the bed. She placed the resident's [redacted] over the side of the bed then she pulled the resident to a sitting position. She put both her [redacted] under the resident's under arms then she lifted the resident from the bed and placed her in the chair. The resident's [redacted] did not touch the floor during the entirety of the transfer but rather her [redacted] remained bent at the [redacted]. The resident required total assistance with transferring. Class III	A 007		
A 078 SS=D	59A-36.010(2) FAC Staffing Standards - Staff (2) STAFF. (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 [redacted]. 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. 1. Evidence of a negative [redacted] 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 [redacted] testing materials satisfies the annual [redacted] examination requirement. An individual with a positive [redacted] test must	A 078		

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A 078	Continued From page 6 submit a health care provider's statement that the individual does not constitute a risk of [redacted]. 2. If any staff member has, or is suspected of having, a communicable [redacted], 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 [redacted]. (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. (c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C. (d) An assisted living facility [redacted] 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. (e) For facilities with a licensed capacity of 17 or more residents, the facility must: 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and, 2. Maintain time sheets for all staff. (f) Level 2 background screening must be	A 078		

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A 078	Continued From page 7 conducted for staff, including staff . . . . . by the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S. This Statute or Rule is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure staff were qualified to perform their assigned duties consistent with their level of education, training, preparation and experience by allowing an unlicensed caregiver (owner) to prepare an syringe for injection for 1 of 6 sampled residents (#6,) failed to ensure the personnel record for 1 of 3 sampled staff (A) contained documented evidence of a negative . . . . . ( ) exam on an annual basis and failed to ensure 1 of 3 sampled staff (administrator) submitted a written statement from a health care provider documenting freedom from communicable within 30 days after beginning employment. Findings: Observations made at 7:50 p.m. on . . . . . revealed the facility's unlicensed owner washed her . then she donned gloves. She removed a locked box from the refrigerator then took it to resident #6. She prepped the resident's right abdomen with then removed an , . from the box. She put a needle onto the pen then she dialed the pen to 10 units, which is a task that unlicensed staff are not qualified to perform. She handed the pen to the resident, instructed him to inject it into his abdomen then she guided his to his abdomen, at which time he self-injected the . . . The owner sanitized the , , removed her gloves then signed the MOR.	A 078		

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A 078	Continued From page 8 Resident #6's current 1823 health assessment, dated , indicated that his diagnoses included type 2 and with left , and he required assistance with self-administration of medications. A health care provider's order, dated , instructed to give the resident 10 units , daily at bedtime. At 8:30 p.m. on the owner said she did not know that unlicensed staff were not allowed to prepare an , for injection. Caregiver A's personnel record revealed a hire date of . The most recent negative exam in the record was dated in the form of a , . The record did not contain documented evidence of a negative exam for 2020, as required. At 11:53 a.m. on , caregiver A confirmed the findings and said the last time she had a exam was in , . The administrator's personnel record revealed a hire date of . The record did not contain a written statement from a health care provider documenting freedom from communicable , as required. At 2:06 p.m. on the owner confirmed the findings and said she did not know the administrator had to have the statement. Class III	A 078		