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
	AL11965383	A. BUILDING: _____ B. WING _____	R 09/17/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SAVANNAH COTTAGE OF LAKELAND	605 CARPENTERS WAY LAKELAND, FL 33809

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{A 000}	Initial Comments A revisit to Complaint (Complaint Numbers 2019016544, 2019016788, 2019016823 and 2019016826) was conducted at Savannah Cottages of Lakeland Assisted Living Facility on . There were deficiencies identified at the time of the survey.	{A 000}		
A 025 SS=D	429.26(7) FS; 59A-36.007(1) FAC Resident Care - Supervision 429.26 (7) The facility must notify a licensed physician when a resident exhibits signs of or , or has a change of condition in order to rule out the presence of an underlying physiological condition that may be contributing to such or . The notification must occur within 30 days after the acknowledgment of such signs by facility staff. If an underlying condition is determined to exist, the facility shall arrange, with the appropriate health care provider, the necessary care and services to treat the condition. 59A-36.007 An assisted living facility must provide care and services appropriate to the needs of residents accepted for admission to the facility. (1) SUPERVISION. Facilities must offer personal supervision as appropriate for each resident, including the following: (a) Monitoring of the quantity and quality of resident diets in accordance with rule 59A-36.012, F.A.C. (b) Daily observation by designated staff of the activities of the resident while on the premises, and awareness of the general health, safety, and physical and emotional well-being of the resident. (c) Maintaining a general awareness of the	A 025		

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A 025	Continued From page 1 resident's whereabouts. The resident may travel independently in the community. (d) Contacting the resident's health care provider and other appropriate party such as the resident's family, guardian, health care surrogate, or case manager if the resident exhibits a significant change. (e) Contacting the resident's family, guardian, health care surrogate, or case manager if the resident is discharged or moves out. (f) Maintaining a written record, updated as needed, of any significant changes, any illnesses that resulted in medical attention, changes in the method of medication administration, or other changes that resulted in the provision of additional services. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to provide care, services and supervision appropriate to the needs of five memory care Residents (#1, #2, #3, #4 and #5) of five residents sampled in the facility's COVID-19 unit. Finding included: An observation made during tour conducted on at 11:45 am of the facility's COVID-19 unit revealed that there was no staff present in the COVID-19 unit that five memory care Residents (#1, #2, #3, #4 and #5) where in isolation. Record review conducted on for Resident #1 revealed, a . . . -to- . . . assessment dated , with the following: Date of Birth: . . . . . . Diagnosis: .	A 025		

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A 025	Continued From page 2 Physical or Sensory Limitation: uses wheelchair [illegible] or Behavioral Status: Alert and Orientated to self, frequent redirection Reorientation Activity of Daily Living (ADL's): Needs assistance's with ambulation, bathing, [illegible], Eating, grooming, toileting, and transferring. Record review conducted on [illegible] for Resident #2 revealed, a [illegible]-to- assessment dated [illegible], with the following: Date of Birth: Diagnosis: [illegible], and , Physical or Sensory Limitation: [illegible] with mobility [illegible] or Behavioral Status: [illegible] with agitation Activity of Daily Living (ADL's): Needs assistances with ambulation, bathing, [illegible], Eating, grooming, toileting, and transferring Record review conducted on for Resident #3 revealed, a [illegible]-to-[illegible] assessment dated , with the following: Date of Birth: Diagnosis: Memory , [illegible] change, unsteady gait Physical or Sensory Limitation: unsteady gait [illegible] or Behavioral Status: [illegible] change and memory [illegible] Activity of Daily Living (ADL's): Independent with [illegible], eating, toileting, and Transferring. Needs assistance with ambulation (uses walker), bathing and Grooming.	A 025		

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A 025	Continued From page 3 Record review conducted on for Resident #4 revealed, a -to- assessment dated , with the following: Date of Birth: Diagnosis: , , , , and Physical or Sensory Limitation: none or Behavioral Status: Alert and orientated with Activity of Daily Living (ADL's): Independent with all Activity of Daily Living except Needs supervision with bathing. Record review conducted on for Resident #5 revealed, a -to- assessment dated , with the following: Date of Birth: Diagnosis: unspecified , and Physical or Sensory Limitation: hearing loss or Behavioral Status: evaluation on consistent with Major likely due to Activity of Daily Living (ADL's): Needs assistances with ambulation, bathing, Eating, grooming, toileting, and transferring During an interview with the Resident Care Coordinator, conducted on at 11:30 AM, she stated that COVID-19 unit is always not manned. The staff do their rounds every two hours. In an interview with the administrator at 11:55 am he stated that before the facility census dropped there was on staff in the COVID-19 unit 24 hours	A 025		

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A 025	Continued From page 4 a day and seven days a week. He stated that a staff being in the unit stopped about two weeks ago. He stated that the residents are checked on every two hours and their medications and meals are brought to them. Class III	A 025		
(A 086) SS=D	59A-36.011(10) FAC Training - ADRD (10) [redacted] AND RELATED ("ADRD") TRAINING REQUIREMENTS. Facilities which advertise that they provide special care for persons with ADRD, or who maintain secured areas as described in Chapter 4, Section 464.4.6 of the Florida Building Code, as adopted in rule 61G20-1.001, F.A.C., Florida Building Code Adopted, must ensure that facility staff receive the following training. (a) Facility staff who interact on a daily basis with residents with ADRD but do not provide direct care to such residents and staff who provide direct care to residents with ADRD, shall obtain 4 hours of initial training within 3 months of employment. Completion of the core training program between [redacted] and [redacted] shall satisfy this requirement. Facility staff who meet the requirements for ADRD training providers under paragraph (g) of this subsection, will be considered as having met this requirement. Initial training, entitled "[redacted] and Related Level I Training," must address the following subject areas: 1. Understanding [redacted]'s and related [redacted]; 2. Characteristics of [redacted]; 3. Communicating with residents with [redacted]'s [redacted]; 4. Family issues;	(A 086)		

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{A 086}	Continued From page 5 5. Resident environment; and, 6. Ethical issues. (b) Staff who have successfully completed both the initial one hour and continuing three hours of ADRD training pursuant to sections 400.1755, 429.917 and 400.6045(1), F.S., shall be considered to have met the initial assisted living facility and Related . . . . . Level I Training. (c) Facility staff who provide direct care to residents with ADRD must obtain an additional 4 hours of training, entitled " and Related . . . . . Level II Training," within 9 months of employment. Facility staff who meet the requirements for ADRD training providers under paragraph (g) of this subsection, will be considered as having met this requirement. and Related Level II Training must address the following subject areas as they apply to these : 1. Behavior management, 2. Assistance with ADLs, 3. Activities for residents, 4. Stress management for the care giver; and, 5. Medical information. (d) A detailed description of the subject areas that must be included in an ADRD curriculum which meets the requirements of paragraphs (a) and (b) of this subsection, can be found in the document "Training Guidelines for the Special Care of Persons with 's . . . . . and Related ," dated , incorporated by reference, available from the Department of Elder Affairs, 4040 Esplanade Way, Tallahassee, Florida 32399-7000. (e) Direct care staff shall participate in 4 hours of continuing education annually as required under section 429.178, F.S. Continuing education received under this paragraph may be used to	{A 086}		

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{A 086}	Continued From page 6 meet 3 of the 12 hours of continuing education required by section 429.52, F.S., and subsection (1) of this rule, or 3 of the 6 hours of continuing education for extended congregate care required by subsection (7) of this rule. (f) Facility staff who have only incidental contact with residents with ADRD must receive general written information provided by the facility on interacting with such residents, as required under section 429.178, F.S., within three (3) months of employment. "Incidental contact" means all staff who neither provide direct care nor are in regular contact with such residents. (g) Persons who seek to provide ADRD training in accordance with this subsection must provide the department or its designee with documentation that they hold a Bachelor's degree from an accredited college or university or hold a license as a registered nurse, and: 1. Have 1 year teaching experience as an educator of caregivers for persons with or related , or 2. Three years of practical experience in a program providing care to persons with or related , or 3. Completed a specialized training program in the subject matter of this program and have a minimum of two years of practical experience in a program providing care to persons with or related . (h) With reference to requirements in paragraph (g), a Master's degree from an accredited college or university in a subject related to the content of this training program can substitute for the teaching experience. Years of teaching experience related to the subject matter of this training program may substitute on a year-by-year basis for the required Bachelor's degree referenced in paragraph (g).	{A 086}		

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{A 086}	Continued From page 7 This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to ensure that direct care staff that provide direct care for residents that have 's and related . . . . . (ADRD) obtained four hours of initial training (ADRD Training) within three months of employment for two (Staff B and Staff C) and an additional four hours of (ADRD) training within nine months of employment for two (Staff A and Staff B) of three employee records sampled. Findings included: Observations made on at 11:00 AM revealed that the facility is a secured memory care assisted living facility. A staff record review conducted on for Staff B with a date of hire of . . . . as a Medication Technician and Resident Assistant, revealed no documentation of having had the initial 4 hours of . . . . and Related . . . . . (ADRD) training, level I within 3 months of employment. A staff record review conducted on for Staff A with a date of hire of . . . . . , as a direct care staff, revealed no documentation of having the additional four hours of ADRD training (within nine months from the date of hire). A staff record review conducted on for Staff B with a date of hire . . . . . , as a direct care staff, revealed no documentation of having had the initial four hours of ADRD (within three months from date of hire) or the additional four hours of ADRD training (within nine months from the date of hire).	{A 086}		

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{A 086}	Continued From page 8 A staff record review conducted on for Staff C with a date of hire of , as resident care coordinator, revealed no documentation of having had the initial four hours of ADRD training (within three months from the date of hire). In an interview with the administrator, conducted on , at 4:28 PM, he confirmed that the direct care staff were missing either ADRD Level I or ADRD Level II training. Class III	{A 086}		