

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11911212	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/03/2020
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

KELLY'S ASSISTED LIVING FACILITY

**1441 - 1451 NW 20TH STREET
FORT LAUDERDALE, FL 33311**

(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 Abbreviated Relicensure, Focused Control and Generator Assessment survey was conducted on at Kelly's Assisted Living Facility. The facility had a deficiency identified at the time of the survey.	A 000		
AL243	429.075(1) FS; 59A-36.011(9) FAC LMH - Training 429.075 (1) To obtain a limited mental health license, a facility must hold a standard license as an assisted living facility, must not have any current uncorrected violations, and must ensure that, within 6 months after receiving a limited mental health license, the facility administrator and the staff of the facility who are in direct contact with mental health residents must complete training of no less than 6 hours related to their duties. This designation may be made at the time of initial licensure or relicensure or upon request in writing by a licensee under this part and part II of chapter 408. Notification of approval or denial of such request shall be made in accordance with this part, part II of chapter 408, and applicable rules. This training must be provided by or approved by the Department of Children and Families. 59A-36.011 (9) LIMITED MENTAL HEALTH TRAINING. (a) Pursuant to section 429.075, F.S., the administrator, managers and staff, who have direct contact with mental health residents in a licensed limited mental health facility, must receive the following training: 1. A minimum of 6 hours of specialized training in working with individuals with mental health diagnoses.	AL243		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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NAME OF PROVIDER OR SUPPLIER KELLY'S ASSISTED LIVING FACILITY			STREET ADDRESS, CITY, STATE, ZIP CODE 1441 - 1451 NW 20TH STREET FORT LAUDERDALE, FL 33311		
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AL243	Continued From page 1 a. The training must be provided or approved by the Department of Children and Families and must be taken within 6 months of the facility's receiving a limited mental health license or within 6 months of employment in a limited mental health facility. b. Training received under this subparagraph may count once for 6 of the 12 hours of continuing education required for administrators and managers pursuant to section 429.52(5), F.S., and subsection (1) of this rule. 2. A minimum of 3 hours of continuing education, which may be provided by the ALF administrator, online, or through distance learning, biennially thereafter in subjects dealing with one or more of the following topics: a. Mental health diagnoses; and, b. Mental health treatment such as: (i) Mental health needs, services, behaviors and appropriate interventions; (ii) Resident progress in achieving treatment goals; (iii) How to recognize changes in the resident's status or condition that may affect other services received or may require intervention; and, () Crisis services and the procedures. 3. For administrators and managers, the continuing education requirement under this subsection will satisfy 3 of the 12 hours of continuing education required biennially pursuant to section 429.52(5), F.S., and subsection (1) of this rule. 4. Administrators, managers and direct contact staff affected by the continuing education requirement under this subsection shall have up to 6 months after the effective date of this rule to meet the training requirement. (b) Administrators, managers and staff do not	AL243			

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AL243	Continued From page 2 have to repeat the initial training should they change employers provided they present a copy of their training certificate to the current employer for retention in the facility's personnel files. They must also ensure that copies of the continuing education training certificates, pursuant to subparagraph (a)2. of this subsection, are retained in their personnel files. This Statute or Rule is not met as evidenced by: Based on employee record review and interview, the facility failed to ensure 1 of 3 sampled staff records reviewed, (Staff C) had information or documentation of completing the required 6 hour of specialized in-service training within 6 months of hire in working with individuals with mental health diagnosis in a licensed limited mental health facility that is provided by or approved by the Department of Children and Families. The facility has a specialty license for (Limited Mental Health) LMH which requires the facility's administrator and the staff who are in direct contact with mental health residents must complete no less than 6 hours related to their duties the approved training by the Department of Children and Families. The Certificate of Completion must be located in the personnel files to review and determine compliance. On _____, during employee record reviews with the Administer/Owner, for Staff C (hire date of _____, shift 3-11pm), there was no documentation contained within the employee file, showing the completion of the regulatory required 6 hr. in-service training in working with individuals with mental health diagnosis in a licensed limited mental health facility that is provided by or approved by the Department of Children and	AL243			

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AL243	Continued From page 3 Families within 6 months of hire or even after that date. Further review revealed the facility failed to have evidence of a minimum of 3 hours of continuing education biennially. During an interview with the Administrator/Owner, on _____ at 12:00 noon, she stated that due to COVID there was no training. Time was offered to the facility to retrieve any documentation that Staff C received any LMH training. The Administrator confirmed the findings and no other information or documentation was provided. Class III	AL243		