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
	AL11963853	A. BUILDING: _____ B. WING _____	06/22/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EVERGREEN MANOR RETIREMENT HOME	3297 S.R. 580 SAFETY HARBOR, FL 34695

(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 extended congregate care monitoring visit was conducted at Evergreen Manor Retirement Home on . Deficiencies were identified at the time of survey.	A 000		
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 . 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 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 testing materials satisfies the annual examination requirement. An individual with a positive test must submit a health care provider's statement that the individual does not constitute a risk of . 2. If any staff member has, or is suspected of having, a communicable , 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 . (b) Staff must be qualified to perform their	A 078		

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A 078	Continued From page 1 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 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 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 record review and interview, the Facility failed to obtain evidence that employees were free from ( ) annually from a health care provider for two employees (Staff A and B) of four sampled employees. Findings Included:	A 078		

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A 078	Continued From page 2 A record review for Staff A, conducted on , revealed that Staff A did not have evidence that the employee was free from annually. The last negative examination for Staff A was dated . Staff A was hired on . A record review for Staff B, conducted on , revealed that Staff B did not have evidence that the employee was free from annually. The last negative examination for Staff B was dated 11/09/2019. Staff B was hired on . During an interview with the Administrator, conducted on at 11:50am, the Administrator was unable to provide evidence from a health care provider that Staff A and B were free from annually as required. Class III	A 078		
A 079 SS=G	59A-36.010(3) FAC Staffing Standards - Levels (3) STAFFING STANDARDS. (a) Minimum staffing: 1. Facilities must maintain the following minimum staff hours per week: Number of Residents, Day Care Participants, and Respite Care Residents Staff Hours/Week 0-5 168 212 16-25 253 26-35 294 36-45 335 46-55 375 56-65 416	A 079		

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A 079	Continued From page 3 66-75 457 76-85 498 86-95 539 For every 20 total combined residents, day care participants, and respite care residents over 95 add 42 staff hours per week. 2. Independent living residents, as referenced in subsection 59A-36.015(3), F.A.C., who occupy beds included within the licensed capacity of an assisted living facility but do not receive personal, limited nursing, or extended congregate care services, are not counted as residents for purposes of computing minimum staff hours. 3. At least one staff member who has access to facility and resident records in case of an emergency must be in the facility at all times when residents are in the facility. Residents serving as paid or volunteer staff may not be left solely in charge of other residents while the facility administrator, manager or other staff are absent from the facility. 4. In facilities with 17 or more residents, there must be at least one staff member awake at all hours of the day and night. 5. A staff member who has completed courses in First Aid and , , ( ) and holds a currently valid card documenting completion of such courses must be in the facility at all times. a. Documentation of attendance at First Aid or courses pursuant to subsection 59A-36.011(5), F.A.C., satisfies this requirement. b. A nurse is considered as having met the course requirements for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, part III, F.S., is considered as having met the course requirements for both First Aid and .	A 079		

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A 079	Continued From page 4 6. During periods of temporary absence of the administrator or manager of more than 48 hours when residents are on the premises, a staff member who is at least , must be physically present and designated in writing to be in charge of the facility. No staff member shall be in charge of a facility for a consecutive period of 21 days or more, or for a total of 60 days within a calendar year, without being an administrator or manager. 7. Staff whose duties are exclusively building or grounds maintenance, clerical, or food preparation do not count towards meeting the minimum staffing hours requirement. 8. The administrator or manager's time may be counted for the purpose of meeting the required staffing hours, provided the administrator or manager is actively involved in the day-to-day operation of the facility, including making decisions and providing supervision for all aspects of resident care, and is listed on the facility's staffing schedule. 9. Only on-the-job staff may be counted in meeting the minimum staffing hours. Vacant positions or absent staff may not be counted. (b) Notwithstanding the minimum staffing requirements specified in paragraph (a), all facilities, including those composed of apartments, must have enough qualified staff to provide resident supervision, and to provide or arrange for resident services in accordance with the residents' scheduled and unscheduled service needs, resident contracts, and resident care standards as described in rule 59A-36.007, F.A.C. (c) The facility must maintain a written work schedule that reflects its 24-hour staffing pattern for a given time period. Upon request, the facility must make the daily work schedules of direct	A 079		

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A 079	Continued From page 5 care staff available to residents or their representatives. (d) The facility must provide staff immediately when the agency determines that the requirements of paragraph (a) are not met. The facility must immediately increase staff above the minimum levels established in paragraph (a), if the agency determines that adequate supervision and care are not being provided to residents, resident care standards described in rule 59A-36.007, F.A.C., are not being met, or that the facility is failing to meet the terms of residents' contracts. The agency will consult with the facility administrator and residents regarding any determination that additional staff is required. Based on the recommendations of the local fire safety authority, the agency may require additional staff when the facility fails to meet the fire safety standards described in rule chapter 69A-40, F.A.C., until such time as the local fire safety authority informs the agency that fire safety requirements are being met. 1. When additional staff is required above the minimum, the agency will require the submission of a corrective action plan within the time specified in the notification indicating how the increased staffing is to be achieved to meet resident service needs. The plan will be reviewed by the agency to determine if it sufficiently increases the staffing levels to meet resident needs. 2. When the facility can demonstrate to the agency that resident needs are being met, or that resident needs can be met without increased staffing, the agency may modify staffing requirements for the facility and the facility will no longer be required to maintain a plan with the agency. (e) Facilities that are co-located with a nursing	A 079		

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A 079	Continued From page 6 home may use shared staffing provided that staff hours are only counted once for the purpose of meeting either assisted living facility or nursing home minimum staffing ratios. (f) Facilities holding a limited mental health, extended congregate care, or limited nursing services license must also comply with the staffing requirements of rules 59A-36.020, 59A-36.021 or 59A-36.022, F.A.C., respectively. This Statute or Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to provide sufficient qualified staff to maintain supervision and to meet resident needs. Additionally, the facility failed to have staff who had access to facility and resident records in the event of an emergency and have a staff member trained in First Aid and [illegible] ( ) at all times. Furthermore, the facility failed to maintain a written work schedule of direct care staff available. Findings included: During an interview with Staff C, conducted on [illegible] at 09:10am, Staff C requested that Agency Representative wait by the front door and the Administrator would be a few minutes. At 09:20am, Staff C stated that the Administrator went to the store and would be [illegible] in a few minutes. Staff C stated that she was the Chef and was not direct care staff and she had no training in activities of daily and behavioral needs. Staff C stated that she did not have access to the admission and discharge log, or other facility and residents' records.	A 079		

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A 079	Continued From page 7 During an interview with the Administrator via telephone, conducted on /201 at 09:22am, the Administrator stated that she had went to the store and that direct care Staff B was there with Staff C. During an interview with Resident #1, conducted on at 09:26am, Resident #1 stated that he wanted to get up out of bed and he could not walk and needed help. During observations, conducted on from 09:10am through 09:44am, revealed that Staff C was the only employee present in the facility, there were no other staff that could assist the residents. During an observation conducted on at 09:44am, the Administrator arrived at the facility and had no groceries or bags in . During an interview with the Administrator conducted on at 09:44am, the Administrator stated that "I am sorry, I did tell [Staff B] she could leave and then I went up to the store real quick". During an observation conducted on at 09:53am, the Facility's Manager arrived at the facility. A review of the resident census, conducted on , revealed that there were ten (10) in-house residents. During an observation conducted on at 11:40am, while in the Administrator's office, the Administrator and Facility's Manager responded to a loud noise in the dining room. Resident #10 was in the dining room sitting on the floor. The	A 079		

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A 079	Continued From page 8 Administrator had been in her office with the Agency Representative since arriving at the facility at 09:44am and the Facility's Manager had been in the Administrator's office with the Agency Representative since arriving at the facility at 09:53am. Staff C continued to be the only staff present attending to resident's needs until 11:57am. During an attempt to review the current direct care staffing schedule, conducted on at 09:20am, 09:50am, and 10:30am, the current direct care staffing schedule was not provided. A record review for Staff B, conducted on , revealed that Staff B's employee record did not contain evidence that the employee had First Aid and training. Staff B was hired on . A record review for Staff C, conducted on , revealed that Staff C was employed as the cook/chef and not as direct care worker. Staff C's employee record did not contain evidence that the employee had First Aid and training, Medication Technician training, or activities of daily living and behavioral needs training. Staff C was hired on . During an interview conducted on at 11:50am, the Administrator stated that Staff C was employed as the chef and was unable to provide First Aid and training for Staff B and Staff C. The Administrator agreed that there must be staff present with access to facility records at all times. The Administrator continued not to provide the direct care staffing schedule. At 11:57am, the Administrator stated that Staff C worked in the kitchen and does not provide care	A 079		

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A 079	Continued From page 9 to the residents. Class II	A 079		