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
	AL11964951	A. BUILDING: _____ B. WING _____	12/09/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ARDEN COURTS OF LARGO	300 HIGHLAND AVENUE, NE LARGO, FL 33770

(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 abbreviated re-licensure survey with limited nursing services (LNS) was conducted at Arden Courts of Largo on . Deficiencies were identified at the time of the 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 records review and interview, the facility failed to ensure that within 30 days after beginning employment, employees submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable , for 2 of 4 sampled employees (Staff C	A 078		

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A 078	Continued From page 2 and Staff D). The facility also failed to provide evidence of a negative ( ) examination, on an annual basis, for 4 of 4 sampled employees (the Administrator, Staff B, Staff C and Staff E). Findings Included: A review of the Administrator's record on revealed an outdated examination. The Administrator was hired on and the examination, in the record, was dated . A review of Staff B's record on revealed an outdated examination. Staff B was hired on and the examination, in the record, was dated . A review of Staff C's record on revealed no communicable statement from a health care provider and no examination. Staff C was hired on . A review of Staff E's record on revealed no communicable statement from a health care provider and no examination. Staff E was hired on . In an interview with the Administrative Services Coordinator, at 1:35pm on , she stated that they thought the examinations only needed to be updated every 2 years, not annually. She had no explanation of why 2 of the employees' records did not have a communicable statement from their health care providers documenting that they were free of communicable . Class III	A 078		

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A 083	Continued From page 3	A 083		
A 083 SS=D	59A-36.011(5) FAC Training - First Aid and (5) FIRST AID AND ( ). 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 that the staff member possess current certification that requires the student to demonstrate, in person, that he or she is able to perform and which is issued by an instructor or training provider that is approved to provide training by the American Red Cross, the American Association, the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education satisfies this requirement. (b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, Part III, F.S., shall be considered as having met the training requirements for both First Aid and C.P.R. This Statute or Rule is not met as evidenced by: Based on record review, observation and interview, the facility failed to demonstrate that they had a staff member who had completed courses in First Aid and ( ), and who held a valid card documenting completion of such courses, in the facility at all times. Findings Included: A review of the Administrator's record was conducted on . The Administrator's	A 083		

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A 083	Continued From page 4 record revealed that he had no valid cards documenting completion of or First Aid training courses. An interview with the Administrative Services Coordinator was conducted at 1:45pm on . . . . . , and she stated that the Administrator usually worked during the day, and that she did not think he was required to have . or First Aid training, because there were other employees in the building that had the training. A review of Staff B's record was conducted on . Staff B's record revealed that she had no valid cards documenting completion of or First Aid training courses. The record showed that Staff B worked as a resident aide on the evening shift, from 3:00pm to 11:00pm. A review of Staff C's record was conducted on . . . . . . Staff C's record revealed that she had no valid cards documenting completion of or First Aid training courses. The record showed that Staff C worked as a resident aide on the night shift, from 11:00pm to 7:00am. A review of Staff E's record was conducted on . Staff E's record revealed that she had no valid cards documenting completion of . or First Aid training courses. The record showed that Staff E worked as a resident aide on the day shift, from 7:00am to 3:00pm. An interview was conducted with the Administrative Services Coordinator at 1:45pm on , and she stated that the facility had nurses working in the building every day and on every shift, and that the nurses were exempt from First Aid training. She offered to demonstrate that they had nurses who worked at the facility who	A 083		

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A 083	Continued From page 5 also had training. In an observation at 2:15pm on , 3 of the facility's management team - the Administrative Services Coordinator, the Mobile Administrator and the Resident Services Coordinator, were seen searching through employee records, in an attempt to find anyone, whether it be a nurse or not, who had a valid card documenting completion of taking a or a First Aid course. At 2:15pm on , the Administrative Services Coordinator provided the Activities Director's record, which revealed a valid card documenting she had current training, however there was no documentation of any First Aid training in the record. At 2:30pm on , interviews were conducted with the Administrative Services Coordinator, the Mobile Administrator and the Resident Services Coordinator, in which they all stated that the facility could not demonstrate that they had a staff member who had completed courses in First Aid and , and who held a valid card documenting completion of such courses, in the facility at all times. Class III	A 083		