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
	AL11963950	A. BUILDING: _____ B. WING _____	R 03/09/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BENEVA LAKES ASSISTED LIVING CENTER	743 S. BENEVA ROAD SARASOTA, FL 34232

(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 revisit survey was conducted on ..... at Beneva Lakes Assisted Living Center, an assisted living facility in Sarasota, Florida. This was a second follow-up to the complaint 2021007603 survey completed on ..... . The following is a description of the deficiencies found at the time of the visit.	{A 000}		
{A 077}	429.176 FS; 429.52( ),59A-36.01(1) FAC Staffing Standards - Administrators 429.176 Notice of change of administrator.-If, during the period for which a license is issued, the owner changes administrators, the owner must notify the agency of the change within 10 days and provide documentation within 90 days that the new administrator meets educational requirements and has completed the applicable core educational requirements under s. 429.52. A facility may not be operated for more than 120 consecutive days without an administrator who has completed the core educational requirements. 429.52 (4) A facility administrator must complete the required core training, including the competency test, within 90 days after the date of employment as an administrator. Failure to do so is a violation of this part and subjects the violator to an administrative fine as prescribed in s. 429.19. Administrators licensed in accordance with part II of chapter 468 are exempt from this requirement. Other licensed professionals may be exempted, as determined by the agency by rule. (5) Administrators are required to participate in continuing education for a minimum of 12 contact	{A 077}		

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{A 077}	Continued From page 1	{A 077}		

hours every 2 years.

59A-36.010
(1) ADMINISTRATORS. Every facility must be under the supervision of an administrator who is responsible for the operation and maintenance of the facility including the management of all staff and the provision of appropriate care to all residents as required by chapters 408, part II, 429, part I, F.S., and rule chapter 59A-35, F.A.C., and this rule chapter.
(a) An administrator must:
1. Be at least [illegible];
2. If employed on or after [illegible], have, at a minimum, a high school diploma or G.E.D.;
3. Be in compliance with Level 2 background screening requirements pursuant to sections 408.809 and 429.174, F.S.;
4. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C., no later than 90 days after becoming employed as a facility administrator. Administrators who attended core training prior to [illegible], are not required to take the competency test unless specified elsewhere in this rule; and,
5. Satisfy the continuing education requirements pursuant to rule 59A-36.011, F.A.C.
Administrators who are not in compliance with these requirements must retake the core training and core competency test requirements in effect on the date the non-compliance is discovered by the agency or the department.
(b) In the event of extenuating circumstances, such as the [illegible] of a facility administrator, the agency may permit an individual who otherwise has not satisfied the training requirements of subparagraph (1)(a)4. of this rule, to temporarily

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{A 077}	Continued From page 2 serve as the facility administrator for a period not to exceed 90 days. During the 90 day period, the individual temporarily serving as facility administrator must: 1. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C.; and, 2. Complete all additional training requirements if the facility maintains licensure as an extended congregate care or limited mental health facility. (c) Administrators may supervise a maximum of either three assisted living facilities or a group of facilities on a single campus providing housing and health care Administrators who supervise more than one facility must appoint in writing a separate manager for each facility. However, an administrator supervising a maximum of three assisted living facilities, each licensed for 16 or fewer beds and all within a 15 mile . . . . of each other, is only required to appoint two managers to assist in the operation and maintenance of those facilities. (d) An individual serving as a manager must satisfy the same qualifications, background screening, core training and competency test requirements, and continuing education requirements as an administrator pursuant to paragraph (1)(a) of this rule. Managers who attended the core training program prior to , . , are not required to take the competency test unless specified elsewhere in this rule. In addition, a manager may not serve as a manager of more than a single facility, except as provided in paragraph (1)(c) of this rule, and may not . . . . . , serve as an administrator of any other facility. (e) Pursuant to section 429.176, F.S., facility owners must notify the Agency Central Office within 10 days of a change in facility administrator	{A 077}		

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{A 077}	Continued From page 3 on the Notification of Change of Administrator form, AHCA Form 3180-1006, , which is incorporated by reference and available online at: http://www.flrules.org/Gateway/reference.asp?No=Ref-09393. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the administrator, who is responsible for the operation and maintenance of the facility, failed to employ enough housekeeping staff to provide residents the services needed to have a clean and sanitary environment facility wide, and failed to refurbish rooms as needed. The findings included: 1. In an interview conducted on at 9:50 a.m., the Manager-in-training said she performs housekeeping and laundry for the facility. She has two other staff members who provide housekeeping and laundry services. A review of the housekeeping schedule shows the Manager-in-training works five days a week. Staff A works four days in the assisted living facility and two days a week in the nursing home next door. Staff B worked five days a week in the facility. Manager-in-training said Staff B also does laundry. Therefore, the facility has 2 staff who work housekeeping but two of those staff also performs laundry duties. An interview was conducted with the Director of Nursing (DON) on at 9:55 a.m. He confirmed there are three staff who performs housekeeping and laundry duties for the entire facility. He said there are 83 residents living in	{A 077}		

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{A 077}	Continued From page 4	{A 077}		

the facility at this time. One of the staff also works in the nursing home next door to the facility.

2. A tour of the facility conducted with the DON at 10:00 a.m. on showed the following:

: Smelled of throughout the room. The resident's bed sheets were dirty. In an interview on at 10:00 a.m., Resident #4 said, housekeeping (HK) comes in once a week.

: Floor dirty and clutter throughout the room. In an interview on at 10:15 a.m., Resident #10 said, HK comes in about once a week.

: Carpet stained, clutter throughout the room. In an interview on at 10:20 a.m.. Resident #11 said, HK cleans her room once a week.

: Carpet stained throughout the room and frayed at the front door area.

: Carpet stained throughout the room, clutter throughout the room, bathroom dirty and feces on the commode.

: Carpet stained throughout the room, clutter in the room. An interview was conducted with the president of resident council on at 10:35 a.m. She said she and her roommate have a lot of clutter in the room but HK comes in to clean it.

.: Room dirty and full of clutter, Carpet stained throughout the room.

.: Floors in bedroom and bathroom dirty.

: Carpet stained throughout the room.

: Bathroom floor dirty, vanity broken and the sink is dirty.

All room windows and window frames are dirty with black and brown substance. It is difficult

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{A 077}	Continued From page 5 to see through most of these windows. In the rooms with sliding glass doors, the windows are dirty and the tracks are dirty with black and brown substance and many cob webs. The DON was present for these observations and confirmed these findings. Class III	{A 077}		
{A 152}	59A-36.014(3) FAC Physical Plant - Safe Living Environ/Other (3) OTHER REQUIREMENTS. (a) All facilities must: 1. Provide a safe living environment pursuant to section 429.28(1)(a), F.S.; 2. Be maintained free of hazards; and, 3. Ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order. (b) Pursuant to section 429.27, F.S., residents must be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident bedroom or sleeping area must have at least the following furnishings: 1. A clean, comfortable bed with a mattress no less than 36 inches wide and 72 inches long, with the top surface of the mattress at a comfortable to ensure easy access by the resident, 2. A closet or wardrobe space for hanging clothes, 3. A dresser, or other furniture designed for storage of clothing or personal effects, 4. A table or nightstand, bedside lamp or floor lamp, and waste basket; and, 5. A comfortable chair, if requested.	{A 152}		

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{A 152}	Continued From page 6 (c) The facility must maintain master or duplicate keys to resident bedrooms to be used in the event of an emergency. (d) Residents who use portable bedside commodes must be provided with privacy during use. (e) Facilities must make available linens and personal laundry services for residents who require such services. Linens provided by a facility must be free of tears, stains and must not be . . . . . . This Statute or Rule is not met as evidenced by: Based on observation and interviews, the facility failed to provide the residents with a homelike environment, free from dirt, debris, and clutter. The findings included: 1. A tour of the facility was conducted with the DON at 10:00 a.m. on . . . . showed the following: : Smelled of throughout the room. The resident's bed sheets were dirty. In an interview at 10:00 a.m. on , Resident #4 said housekeeping (HK) comes in once a week. : Floor dirty and clutter throughout the room. In an interview on . . . at 10:15 a.m., Resident #10 said HK comes in about once a week. : Carpet stained, clutter throughout the room. In an interview on . . . . at 10:20 a.m., Resident #11 said HK cleans her room once a week. : Carpet stained throughout the room and frayed at the front door area. : Carpet stained throughout the room, clutter throughout the room, bathroom dirty and feces on the commode.	{A 152}		

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{A 152}	Continued From page 7 : Carpet stained throughout the room, room cluttered. An interview was conducted with the president of resident council on at 10:35 a.m. She said she and her room mate have a lot of clutter in the room but HK comes in to clean it. : Room dirty, full of clutter, and carpet stained throughout the room. : Floors in bedroom and bathroom dirty. : Carpet stained throughout the room. : Bathroom floor dirty, vanity broken and the sink is dirty. In an interview on at 10:50 a.m., Resident #12 said his floors are always dirty. All room windows and window frames are dirty with black and brown substance. It is difficult to see through most of these windows. In the rooms with sliding glass doors, the windows are dirty and the tracks are dirty with black and brown substance and many cob webs. The DON was present for these observations and confirmed these findings. Class III	{A 152}		