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
	AL11969331	A. BUILDING: _____ B. WING _____	03/15/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARGATE ASSISTED LIVING & ADULT CARE CENTEI	521 NW 70TH WAY MARGATE, FL 33063

(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 Relicensure and Generator Monitoring survey was conducted on [redacted] at Margate Assisted Living & Adult Care Center. The facility had deficiencies identified related to the Relicensure at the time of the survey.	A 000		
A 081	429.52(1 & 7) FS; 59A-36.011([redacted]) FAC Training - Staff In-Service 429.52(1) (1) Each new assisted living facility employee who has not previously completed core training must attend a preservice orientation provided by the facility before interacting with residents. The preservice orientation must be at least 2 hours in duration and cover topics that help the employee provide responsible care and respond to the needs of facility residents. Upon completion, the employee and the administrator of the facility must sign a statement that the employee completed the required preservice orientation. The facility must keep the signed statement in the employee's personnel record. (7) Facility staff shall participate in inservice training relevant to their job duties as specified by agency rule. Topics covered during the preservice orientation are not required to be repeated during inservice training. A single certificate of completion that covers all required inservice training topics may be issued to a participating staff member if the training is provided in a single training course. 59A-36.011 (2) STAFF PRESERVICE ORIENTATION. (a) Facilities must provide a preservice orientation of at least 2 hours to all new assisted	A 081		

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A 081	Continued From page 1	A 081		

living facility employees who have not previously completed core training as detailed in subsection (1).
(b) New staff must complete the preservice orientation prior to interacting with residents.
(c) Once complete, the employee and the facility administrator must sign a statement that the employee completed the preservice orientation which must be kept in the employee's personnel record.
(d) In addition to topics that may be chosen by the facility administrator, the preservice orientation must cover:
1. Resident's rights; and,
2. The facility's license type and services offered by the facility.
(3) STAFF IN-SERVICE TRAINING. Facility administrators or managers shall provide or arrange for the following in-service training to facility staff:
(a) Staff who provide direct care to residents, other than nurses, certified nursing assistants, or home health aides trained in accordance with rule 59A-8.0095, F.A.C., must receive a minimum of 1 hour in-service training in [illegible] control, including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use its [illegible] control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to [illegible] borne [illegible], may be used to meet this requirement.
(b) Staff who provide direct care to residents must receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects:
1. Reporting adverse incidents.

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A 081	Continued From page 2 2. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. (c) Staff who provide direct care to residents, who have not taken the core training program, shall receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects: 1. Resident rights in an assisted living facility. 2. Recognizing and reporting resident , neglect, and , ... The facility must use its prevention policies and procedures when offering this training. (d) Staff who provide direct care to residents, other than nurses, CNAs, or home health aides trained in accordance with rule 59A-8.0095, F.A.C., must receive 3 hours of in-service training within 30 days of employment that covers the following subjects: 1. Resident behavior and needs. 2. Providing assistance with the activities of daily living. (e) Staff who prepare or serve food, who have not taken the assisted living facility core training must receive a minimum of 1-hour-in-service training within 30 days of employment in safe food handling practices. (f) All facility staff shall receive in-service training regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment. 1. All facility staff shall be provided with a copy of the facility's resident elopement response policies and procedures. 2. All facility staff shall demonstrate an understanding and competency in the implementation of the elopement response policies and procedures.	A 081		

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A 081	Continued From page 3	A 081		

This Statute or Rule is not met as evidenced by:
Based on interview and record review the facility failed to ensure 2 of 3 employee personnel records reviewed contained the required mandatory in-service training to include Staff A and Staff B.

The findings included:

1) Review of the personnel record for Staff A revealed a date of hire of as Direct Care Personnel to work the 7:00 PM to 7:00 AM shift. Further review of the personnel record revealed the 3-hour in-service training pertaining to Activities of Daily Living (ADL) and Behavioral Needs training, 1-hour in-service training pertaining to Incident Reporting and Reporting Major Incidents, facility Emergency Procedures, 1-hour inservice training pertaining to Control, Resident Rights and Recognizing/Reporting and Neglect, Elopement Response training and Nutrition and Safe Food Handling training were not available for review.

2) Review of the personnel record for Staff B revealed a date of hire of as Direct Care Personnel to work the 7:00 AM to 7:00 PM shift. Further review of the personnel record revealed the 1-hour in-service training pertaining to Incident Reporting and Reporting Major Incidents, facility Emergency Procedures, Elopement Response training and Nutrition and Safe Food Handling training were not available for review.

On at 3:10 PM, an interview was conducted with the Administrator who

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A 081	Continued From page 4 acknowledged the personnel records did not include the required training documentation. Class III	A 081		
A 082	59A-36.011(4) FAC Training - / (4) / (/). Pursuant to section 381.0035, F.S., all facility employees, with the exception of employees subject to the requirements of section 456.033, F.S., must complete a one-time education course on and , including the topics prescribed in the section 381.0035, F.S. New facility staff must obtain the training within 30 days of employment. Documentation of compliance must be maintained in accordance with subsection (12), of this rule. This Statute or Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure that 1 out 3 sampled staff, Staff A, had completed / training within 30 days of employment. The findings included: Review of the personnel record for Caregiver Staff A revealed a date of hire of . Further review revealed no evidence of completion of / training available for review. During an interview conducted with the Administrator on at 4:15 PM, she acknowledged the findings and no additional information was provided.	A 082		

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A 082	Continued From page 5 Class III	A 082		
A 090	59A-36.011(11) FAC Training - (11) TRAINING. (a) Currently employed facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policies and procedures regarding (b) Newly hired facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policy and procedures regarding within 30 days after employment. (c) Training shall consist of the information included in rule 59A-36.009, F.A.C. This Statute or Rule is not met as evidenced by: Based on interview and record review the facility failed to ensure 2 of 3 personnel records reviewed contained the required in-service training for ( ) Policies and Procedures, to include Staff A and Staff B. The findings included: 1) Review of the personnel record for the Caregiver Staff A revealed a date of hire of to work the 7:00 AM to 7:00 PM shift. Further review of the personnel record revealed the 1-hour in-service training for Policies and Procedures was not available for review.	A 090		

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A 090	Continued From page 6 2) Review of the personnel record for Home Health Aide Staff B revealed a date of hire of [redacted] to work the 7:00 PM to 7:00 AM shift. Further review of the personnel record revealed the 1-hour in-service training for [redacted] Policies and Procedures was not available for review. On [redacted] at 4:00 PM, an interview was conducted with the Administrator who acknowledged the findings. Class III	A 090		
A 161	429.275(2) FS; 59A-36.015(2) FAC Records - Staff 429.275 (2) The administrator or owner of a facility shall maintain personnel records for each staff member which contain, at a minimum, documentation of background screening, if applicable, documentation of compliance with all training requirements of this part or applicable rule, and a copy of all licenses or certification held by each staff who performs services for which licensure or certification is required under this part or rule. 59A-36.015 (2) STAFF RECORDS. (a) Personnel records for each staff member must contain, at a minimum, a copy of the employment application, with references furnished, and documentation verifying freedom from signs or symptoms of communicable [redacted]. In addition, records must contain the following, as applicable: 1. Documentation of compliance with all staff training and continuing education required by rule	A 161		

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A 161	Continued From page 7 59A-36.011, F.A.C., 2. Copies of all licenses or certifications for all staff providing services that require licensing or certification, 3. Documentation of compliance with level 2 background screening for all staff subject to screening requirements as specified in section 429.174, F.S., and rule 59A-36.010, F.A.C., 4. For facilities with a licensed capacity of 17 or more residents, a copy of the job description given to each staff member pursuant to rule 59A-36.010, F.A.C., 5. Documentation verifying direct care staff and administrator participation in resident elopement drills pursuant to paragraph 59A-36.007(8)(c), F.A.C. (b) The facility is not required to maintain personnel records for staff provided by a licensed staffing agency or staff employed by an entity ⌄ to provide direct or indirect services to residents and the facility. However, the facility must maintain a copy of the contract between the facility and the staffing agency or contractor as described in rule 59A-36.010, F.A.C. (c) The facility must maintain the written work schedules and staff time sheets for the most current 6 months as required by rule 59A-36.010, F.A.C. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure that a copy of the employment application with references was present in the employee record for 2 of 3 sampled employees, for Staff A and Staff B. The findings included: 1) Review of the employee personnel record for	A 161		

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A 161	Continued From page 8 Caregiver Staff A revealed a date of hire of . Further review revealed no employment application with references available for review. 2) Review of the employee personnel record for Home Health Aide Staff B revealed a date of hire of . Further review revealed no employment application with references available for review. On at 4:15 PM, an interview was conducted with the Administrator. She acknowledged the findings and no additional information was provided. Class III	A 161		