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 |
|---|---|---|---|
| | AL11964619 | A. BUILDING: _____ B. WING _____ | 05/24/2022 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| BAY VILLAGE OF SARASOTA, INC. | 8400 VAMO ROAD SARASOTA, FL 34231 |

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| A 000 | Initial Comments<br><br>An unannounced abbreviated relicensure, limited nursing service and emergency power plan monitoring survey was conducted at Bay Village of Sarasota, Inc., an assisted living facility in Sarasota, Florida.<br><br>The following is a description of the deficiencies. | A 000 | | |
| A 081 | 429.52(1 & 7) FS; 59A-36.011( ) FAC Training - Staff In-Service<br><br>429.52(1)<br>(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.<br><br>(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.<br><br>59A-36.011<br>(2) STAFF PRESERVICE ORIENTATION.<br>(a) Facilities must provide a preservice | A 081 | | |

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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| A 081 | Continued From page 1<br>orientation of at least 2 hours to all new assisted living facility employees who have not previously completed core training as detailed in subsection (1).<br>(b) New staff must complete the preservice orientation prior to interacting with residents.<br>(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.<br>(d) In addition to topics that may be chosen by the facility administrator, the preservice orientation must cover:<br>1. Resident's rights; and,<br>2. The facility's license type and services offered by the facility.<br>(3) STAFF IN-SERVICE TRAINING. Facility administrators or managers shall provide or arrange for the following in-service training to facility staff:<br>(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 control, including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use its control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to borne , may be used to meet this requirement.<br>(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: | A 081 | | |

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| A 081 | Continued From page 2<br>1. Reporting adverse incidents.<br>2. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation.<br>(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:<br>1. Resident rights in an assisted living facility.<br>2. Recognizing and reporting resident . . . . ., neglect, and , . The facility must use its . . . . . prevention policies and procedures when offering this training.<br>(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:<br>1. Resident behavior and needs.<br>2. Providing assistance with the activities of daily living.<br>(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.<br>(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.<br>1. All facility staff shall be provided with a copy of the facility's resident elopement response policies and procedures.<br>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 record review and interview, the facility failed to ensure facility employees complete the in-service training required by Florida Administrative Code within 30 days of employment for 3 (Staff A, B, and C) of 3 employee files reviewed.

The findings included:

On a review of Staff A's employee file revealed a hire date of as a Licensed Practical Nurse (LPN). Staff A's file did not contain documentation of in-service training regarding the facility's resident elopement response policies and procedures. Staff A's file did not contain documentation of having completed 1-hour incident report training. Staff A's file did not contain documentation of completing 1-hour in-service training covering resident rights and recognizing and reporting resident , neglect and , utilizing the facility's prevention policies and procedures. Staff A's file did not contain documentation of completing 1-hour in-service training in safe food handling practices.

On a review of Staff B's employee file revealed a hire date of as a Registered Nurse (RN). Staff B's file did not contain documentation of in-service training regarding the facility's resident elopement response policies and procedures. Staff B's file did not contain documentation of having completed 1-hour incident report training. Staff B's file did not contain documentation of completing 1-hour

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| A 081 | Continued From page 4<br><br>in-service training covering resident rights and recognizing and reporting resident , neglect and , utilizing the facility's prevention policies and procedures. Staff B's file did not contain documentation of completing 1-hour in-service training in safe food handling practices.<br><br>On a review of Staff C's employee file revealed a hire date of as a Certified Nurse Assistant (CNA). Staff C's file did not contain documentation of in-service training regarding the facility's resident elopement response policies and procedures. Staff C's file did not contain documentation of having completed 1-hour incident report training. Staff C's file did not contain documentation of completing 1-hour in-service training covering resident rights and recognizing and reporting resident , neglect and , utilizing the facility's prevention policies and procedures. Staff C's file did not contain documentation of completing 1-hour in-service training in safe food handling practices.<br><br>On at 3 p.m., the Director of Health Services said the facility had been utilizing a generalized computer based learning program from which she had provided the list of courses staff A, B and C watched on the computer. She agreed the trainings on the computer based system were not specific to the policies and procedures of the facility itself, and several of the required trainings were not listed or participation did not meet time requirements.<br><br>Class III | A 081 | | |

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| A 090 | Continued From page 5 | A 090 | | |
| A 090 | 59A-36.011(11) FAC Training - | A 090 | | |

(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 record review and interview, the facility failed to ensure facility employees complete at least one hour of training in the facility's policies and procedures regarding ( ) within 30 days after employment and maintain documentation of completion for 3 (Staff A, B, and C) of 3 employee files reviewed.

The findings included:

On a review of Staff A's employee file revealed a hire date of as a Licensed Practical Nurse (LPN). Staff A's file contained no documentation of having completed a 1-hour in-service in the facility's policies and procedures regarding ( ).

On a review of Staff B's employee file revealed a hire date of as a Registered Nurse (RN). Staff B's file contained no

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| A 090 | Continued From page 6<br><br>documentation of having completed a 1-hour in-service in the facility's policies and procedures regarding . . . . . (. . . ).<br><br>On . . . . . a review of Staff C's employee file revealed a hire date of as a Certified Nurse Assistant (CNA). Staff C's file contained no documentation of having completed a 1-hour in-service in the facility's policies and procedures regarding . ( ).<br><br>On at 3 p.m., the Director of Health Services said the facility had been utilizing a generalized computer based learning program from which she had provided the list of courses staff A, B and C watched on the computer. She agreed the trainings on the computer based system were not specific to the policies and procedures of the facility itself, and several of the required trainings were not listed or participation did not meet time requirements.<br><br>Class III | A 090 | | |
| A 091 | 59A-36.011(12) FAC Training - Documentation & Monitoring<br><br>(12) TRAINING DOCUMENTATION AND MONITORING.<br>(a) Except as otherwise noted, certificates, or copies of certificates, of any training required by this rule must be documented in the facility's personnel files. The documentation must include the following:<br>1. The title of the training program,<br>2. The subject matter of the training program,<br>3. The training program agenda,<br>4. The number of hours of the training program,<br>5. The trainee's name, dates of participation, and | A 091 | | |

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| A 091 | Continued From page 7<br><br>location of the training program,<br>6. The training provider's name, dated signature and credentials, and professional license number, if applicable.<br>(b) Upon successful completion of training pursuant to this rule, the training provider must issue a certificate to the trainee as specified in this rule.<br>(c) The facility must provide the Department of Elder Affairs and the Agency for Health Care Administration with training documentation and training certificates for review, as requested. The department and agency reserve the right to attend and monitor all facility in-service training, which is intended to meet regulatory requirements.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on record review and interview, the facility failed to issue and maintain training certificates in the facility's personnel files upon successful completion of trainings as required by Florida rule to include the title of the training, subject matter of the training, the training program agenda, number of hours of the program, the trainees name, dates of participation and location of the training program and the training providers name, dated signature and credentials and professional license number, if applicable. For (Staff A, B, and C) of 3 employee files reviewed.<br><br>The findings included:<br><br>On a review of Staff A's employee file revealed a hire date of as a Licensed Practical Nurse (LPN). Staff A's employee file was of multiple certificates documenting completion of trainings as required per Florida statute. | A 091 | | |

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| A 091 | Continued From page 8<br><br>On . . . . . a review of Staff B's employee file revealed a hire date of as a Registered Nurse (RN). Staff A's employee file was . . of multiple certificates documenting completion of trainings as required per Florida statute.<br><br>On . . . . . a review of Staff C's employee file revealed a hire date of as a Certified Nurse Assistant (CNA). Staff C's employee file was of multiple certificates documenting completion of trainings as required per Florida statute.<br><br>On at 3 p.m., the Director of Health Services said the facility had been utilizing a generalized computer based learning program from which she had printed the list of courses staff A, B and C watched on the computer. She agreed no on actually taught the courses in person. She agreed the trainings on the computer based system were not specific to the policies and procedures of the facility itself, and the lists of trainings she provided were lacking proper documentation.<br><br>Class III | A 091 | | |