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
	AL11965874	A. BUILDING: _____ B. WING _____	07/06/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MANGROVE BAY	120 MANGROVE BAY WAY JUPITER, FL 33477

(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 Change of Ownership and Generator Monitoring survey were conducted on through at Mangrove Bay. The facility had deficiencies identified related to the Change of Ownership at the time of the survey.	A 000		
A 053	59A-36.008(4) FAC Medication - Administration (4) MEDICATION ADMINISTRATION. (a) For facilities that provide medication administration, a staff member licensed to administer medications must be available to administer medications in accordance with a health care provider's order or prescription label. (b) Unusual reactions to the medication or a significant change in the resident's health or behavior that may be caused by the medication must be documented in the resident's record and reported immediately to the resident's health care provider. The contact with the health care provider must also be documented in the resident's record. (c) Medication administration includes conducting any examination or other procedure necessary for the proper administration of medication that the resident cannot conduct personally and that can be performed by licensed staff. (d) A facility that performs clinical laboratory tests for residents, including testing, must be in compliance with the federal Clinical Laboratory Improvement Amendments of 1988 (CLIA) and Chapter 483, Part I, F.S. A valid copy of the federal CLIA Certificate must be maintained in the facility. A federal CLIA certificate is not required if residents perform the test themselves or if a third party assists residents in performing the test. The facility is not required to maintain a federal CLIA Certificate if facility staff assist residents in performing clinical	A 053		

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A 053	Continued From page 1 laboratory testing with the residents' equipment. Information about the federal CLIA Certificate is available from the Laboratory and In-Home Services Unit, Agency for Health Care Administration, 2727 Mahan Drive, Mail Stop 32, Tallahassee, FL 32308; telephone (850)412-4500. This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure a staff member licensed to administer medications was available to administer medications for 1 of 1 residents observed during medication pass who required medication administration (Resident #13). The findings included: During medication observation on ..... at 11:28 AM, Staff E Medication Technician, who is not a licensed nurse, was observed placing Resident #13's crushed medication into a small plastic medication cup with 1 teaspoon of applesauce. Staff E took the small cup of applesauce containing the crushed medication to the resident and fed the mixture to Resident # 13 without any active participation from the resident other than opening her . On at 11:33 AM, Staff E stated that Resident #13 cannot assist with self-administration of her medications, even with ... over ... technique. Staff E stated, "Resident #13 will throw the spoon or fling the applesauce all over the place if you give her the spoon. She can become very combative and fight against you when trying to get her to take her medications." A review of Resident #13's Health Assessment	A 053		

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A 053	Continued From page 2 (AHCA Form 1823) documents that this resident requires help with her medications, and she is to receive medication administration. Medication administration includes the administration of medication that the resident cannot conduct personally and must be performed by licensed staff. On . . . . . at approximately 1:55 PM, the Administrator and Executive Director were notified of the observation of Staff E administering medication to Resident #13. They were also notified of the Resident's inability to participate in the self-administration of medication, even with assistance, per the Staff E Medication Technician's experience with the resident. The Administrator was also informed that Resident #13's Health Assessment documents the resident's need for medication administration, not assistance. The Administrator and Executive Director acknowledged the concern. Class III	A 053		
A 081	429.52(1 & 7) FS; 59A-36.011(. .) 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.	A 081		

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A 081	Continued From page 3 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 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	A 081		

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A 081	Continued From page 4 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. 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 [illegible], neglect, and [illegible]. The facility must use its [illegible] 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.	A 081		

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A 081	Continued From page 5 (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. This Statute or Rule is not met as evidenced by: Based on employee record review and staff interview, the facility failed to ensure 1 of 3 sampled direct care staff, had received required in-service training within 30 days of employment (Staff B). The findings included: During employee record review for Staff B, a Certified Nursing Assistant/Medication Technician hired on , no training certificate could be found within Staff B's employee record that showed completion of the required in-service training, within 30 days of employment, which covered topics related to the reporting of major and adverse incidents. A review of all trainings from date of employment until present (2018 - 2022) did not produce any training completed related to the reporting of major and adverse	A 081		

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A 081	Continued From page 6 incidents. On . . . . . at approximately 11:00 AM, the Human Resource Manager was informed of the missing training certificate, and on . . . . . at 1:45 PM, the Administrator was also informed of the missing training certificate. No training documentation was provided showing Staff B had completed the required training for reporting major and adverse incidents. Class	A 081		
A 083	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.	A 083		

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A 083	Continued From page 7 This Statute or Rule is not met as evidenced by: Based on record review and staff interview, the facility failed to ensure staff who have completed courses in First Aid, and holds a currently valid card documenting completion of such course, are in the facility at all times. This was evidenced by: 1 of 1 unlicensed direct care staff who works the 11:00 PM to 7:00 AM shift had not completed an approved First Aid course nor held a currently valid First Aid certification card (Staff C). The findings included: During employee record review for Staff C, a Certified Nursing Assistant/Medication Technician who was/is scheduled to work the 11:00 PM to 7:00 AM shift from . . . . . to . . . . . , it was noted Staff C's employee record contained no evidence that Staff C had completed a First Aid course and did not hold a currently valid First Aid Certification card. On . . . . . at approximately 11:00 AM, the Human Resource Manager was informed of the missing training certificate for Staff C, and on . . . . . at 1:45 PM, the Administrator was also informed that the missing training certificate had not yet been provided. On . . . . . at 10:31 AM, the Administrator was asked, via email, for a copy of a First Aid training certificate for any staff that works with Staff C covering the 11:00 PM to 7:00 AM shift, but, as of . . . . . at 1:00 PM, no training documentation was provided showing Staff C or any other 11:00 PM to 7:00 AM staff held a currently valid First Aid certification card. Class III	A 083		