

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11963950	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 09/20/2022
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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 the third follow-up to the complaint survey completed on The following is 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}		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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{A 077}	Continued From page 1 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 _____; 2. If employed on or after _____, 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 _____, 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 _____ 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	{A 077}			

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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 ensure staff were performing the tasks as needed. The findings included: On at 9:56 a.m., the Director of Housekeeping said they had hired new staff and had 2 staff working housekeeping and laundry in addition to the Assistant Director of Housekeeping. The Director said she had also hired 2 floor techs who cleaned the carpets, stripped and waxed the floors and did the trash. She said they were in the process of hiring 1 more person so there would be 2 housekeepers on 7 days a week and a floor tech 7 days/week. She said each resident room is cleaned weekly. A tour of the facility on revealed the following: 1. On at 11:01 a.m., had a foul, musty odor. Resident #12 said his mattress covering hadn't been cleaned in months. The shower curtain used as a door to the bathroom was dirty and stained. The door on the vanity in	{A 077}			

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{A 077}	Continued From page 4 the bathroom was broken off. The sink was dirty. The floors and walls of both the bathroom and bedroom had dirty splatter marks throughout. 2. On at 10:22 a.m., Observed a large amount of clutter in 3. On at 10:40 a.m., in observed the bathroom walls had a dried on brown substance, the toilet was dirty, the shower curtain next to the toilet was dirty with brown spots, and the floor was dirty. A dry washcloth with dried brown substance was hanging off the shower rail. 4. On at 10:44 a.m., observed in the bathroom walls and floor to be dirty. 5. On 10:46 a.m., observed in the floors dirty in both the bedroom area and bathroom. The bathroom sink was clogged with water and paper towels. Resident #13 said the sink had been clogged about a week. He said he had been trying hold of the janitor but every time he went to his office he wasn't there. On at 1:45 p.m., in a meeting with the Housekeeping Director and Administrator, the Housekeeping Director said she was not 100% sure what was going on. She said she was just seeing it and did not know the rooms were in that condition. She said she will have to start retraining and start monitoring it again. The Administrator said she realized these conditions had been previously cited. She said she had been pulled often to work on the floor due to staffing issues so monitoring had gone by the wayside.	{A 077}			

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{A 077}	Continued From page 5 Class III (photographic evidence obtained)	{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 height 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. (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	{A 152}		

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{A 152}	Continued From page 6 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: A tour of the facility on revealed the following: 1. On at 11:01 a.m., Resident #12 was observed lying in bed in The room had a foul, musty odor. Resident #12 picked up his blankets, had no sheets on his bed and pointed at his mattress covering and said this hadn't been cleaned in months. The mattress covering was originally white, but looked gray and had dirty spots throughout. The bathroom had no door. The door opening was covered with a dirty, stained shower curtain. The vanity in the bathroom had a door broken off and the sink was dirty. The floors and walls of both the bathroom and bedroom had dirty splatter marks throughout. On at 11:11 a.m., during a tour with the Administrator, she said she would have cleaned immediately. 2. On at 10:22 a.m., observation of revealed a large amount of clutter that blocked easy entrance to the bathroom and made cleaning the floor difficult. Resident #11 said she tries to neaten it but has a medical condition that caused her, and to tire easily. She said she	{A 152}		

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{A 152}	Continued From page 7 was working on it little by little. 3. On at 10:40 a.m., an observation of revealed the bathroom to be dirty. The bathroom walls had a dried on brown substance that looked as if it had oozed down the wall, the toilet was dirty, the shower curtain next to the toilet was dirty with brown spots, and the floor was dirty. A dry washcloth with dried brown substance was hanging off the shower rail. On at 11:11 a.m., on a tour with the Administrator, she said she would not want to use the bathroom in the condition the bathroom in was in. 4. On at 10:44 a.m., an observation of revealed the bathroom walls and floor to be dirty. 5. On 10:46 a.m., an observation of found the floors dirty in both the bedroom area and bathroom. The bathroom sink was clogged with water and paper towels. Resident #13 said the sink had been clogged about a week. He said he had been trying to get hold of the janitor but every time he went to his office he wasn't there. On at 11:11 a.m., on tour with the Administrator, she said staff would have been in and out of that room and should have seen the sink clogged and put in a maintenance request. 6. On at 1:47 p.m. an observation of found the vinyl tile floor be scraped and peeling with pieces missing. There was also a large patched hole on the wall. Resident #14 said it had been that way since he got there. He said he uses a walker and the flooring had	{A 152}		

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{A 152}	Continued From page 8 caused him to trip more than once. On at 1:45 p.m., the Administrator said she realized these conditions had been previously cited. She said she had been pulled often to work on the floor due to staffing issues so monitoring had gone by the wayside. She said they would go to walking rounds with herself, Director of Housekeeping and Maintenance to monitor the condition of the facility. Class III (photographic evidence obtained)	{A 152}		