

Agency for Health Care Administration

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>AL11910105</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____ | (X3) DATE SURVEY<br>COMPLETED<br><br><b>C</b><br><b>10/20/2022</b> |
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

**WESTMINSTER POINT PLEASANT**

**1533 4TH AVENUE WEST  
BRADENTON, FL 34205**

| (X4) ID<br>PREFIX<br>TAG | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ID<br>PREFIX<br>TAG | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE |
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| A 000                    | Initial Comments<br><br>An Abbreviated Biennial Re-licensure and Complaint Investigation (#2022012445) were conducted at Westminster Point Pleasant on ..... Deficiencies were identified at the time of survey.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | A 000               |                                                                                                                          |                          |
| A 081<br>SS=D            | 429.52(1 & 7) FS; 59A-36.011( ) FAC Training<br>- 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 orientation of at least 2 hours to all new assisted living facility employees who have not previously | A 081               |                                                                                                                          |                          |

AHCA Form 3020-0001

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

TITLE

(X6) DATE

Agency for Health Care Administration

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| NAME OF PROVIDER OR SUPPLIER<br><br><b>WESTMINSTER POINT PLEASANT</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>1533 4TH AVENUE WEST<br/>BRADENTON, FL 34205</b>                             |  |                                                                    |
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| A 081                                                                 | Continued From page 1<br><br>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:<br>1. Reporting adverse incidents.<br>2. Facility emergency procedures including | A 081                                                                          |                                                                                                                          |  |                                                                    |

Agency for Health Care Administration

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| A 081                                                                 | <p>Continued From page 2</p> <p>chain-of-command and staff roles relating to emergency evacuation.</p> <p>(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:</p> <ol style="list-style-type: none"> <li>1. Resident rights in an assisted living facility.</li> <li>2. Recognizing and reporting resident . . . . . neglect, and . . . . . The facility must use its . . . . . prevention policies and procedures when offering this training.</li> </ol> <p>(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:</p> <ol style="list-style-type: none"> <li>1. Resident behavior and needs.</li> <li>2. Providing assistance with the activities of daily living.</li> </ol> <p>(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.</p> <p>(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.</p> <ol style="list-style-type: none"> <li>1. All facility staff shall be provided with a copy of the facility's resident elopement response policies and procedures.</li> <li>2. All facility staff shall demonstrate an understanding and competency in the implementation of the elopement response policies and procedures.</li> </ol> | A 081                                                                          |                                                                                                                          |  |                                                                    |

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| A 081                                                                 | <p>Continued From page 3</p> <p>This Statute or Rule is not met as evidenced by:<br/>Based on record review and interview, the facility failed to ensure that 2 of 4 (Staff A and B) employees whose records were reviewed included written documentation of 1 hour of nutrition and safe food handling training, elopement response training, and 3-hours of activities of daily living (ADL) and behavioral needs training within 30 days of hire.</p> <p>Findings included:</p> <p>A record review conducted on _____ for Staff A, with a date of hire of _____ as a Licensed Practical Nurse (LPN), revealed that Staff A's record did not include written documentation of 1 hour of nutrition and safe food handling training, and elopement response training within 30 days of hire.</p> <p>A record review conducted on _____ for Staff B, with a date of hire of _____ as a Personal Care Assistant (PCA), revealed that Staff B's record did not include written documentation of 1 hour of nutrition and safe food handling training, elopement response training, and 3-hours of activities of daily living (ADL) and behavioral needs training within 30 days of hire.</p> <p>During an interview conducted on _____ at 3:33pm, The Administrator confirmed the lack of written documentation of 1 hour of nutrition and safe food handling training, and elopement response training within 30 days of hire for Staff A and the lack of written documentation of 1 hour of nutrition and safe food handling training, elopement response training, and 3-hours of</p> | A 081                                                                          |                                                                                                                          |  |                                                                    |

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| A 081                    | Continued From page 4<br><br>activities of daily living (ADL) and behavioral<br>needs training within 30 days of hire for Staff B.<br><br>Class III                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | A 081               |                                                                                                                          |                          |
| A 161<br>SS=D            | 429.275(2) FS; 59A-36.015(2) FAC Records -<br>Staff<br><br>429.275<br>(2) The administrator or owner of a facility shall<br>maintain personnel records for each staff<br>member which contain, at a minimum,<br>documentation of background screening, if<br>applicable, documentation of compliance with all<br>training requirements of this part or applicable<br>rule, and a copy of all licenses or certification held<br>by each staff who performs services for which<br>licensure or certification is required under this<br>part or rule.<br><br>59A-36.015<br>(2) STAFF RECORDS.<br>(a) Personnel records for each staff member<br>must contain, at a minimum, a copy of the<br>employment application, with references<br>furnished, and documentation verifying freedom<br>from signs or symptoms of communicable<br>. In addition, records must contain the<br>following, as applicable:<br>1. Documentation of compliance with all staff<br>training and continuing education required by rule<br>59A-36.011, F.A.C.,<br>2. Copies of all licenses or certifications for all<br>staff providing services that require licensing or<br>certification,<br>3. Documentation of compliance with level 2<br>background screening for all staff subject to<br>screening requirements as specified in section<br>429.174, F.S., and rule 59A-36.010, F.A.C., | A 161               |                                                                                                                          |                          |

Agency for Health Care Administration

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| A 161                                                                 | <p>Continued From page 5</p> <p>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.,</p> <p>5. Documentation verifying direct care staff and administrator participation in resident elopement drills pursuant to paragraph 59A-36.007(8)(c), F.A.C.</p> <p>(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.</p> <p>(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.</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility licensed for 117 residents failed to ensure that 1 of 4 (Staff A) employees whose records were reviewed included a copy of their job description.</p> <p>Findings included:</p> <p>A record review conducted on ..... for Staff A, with a date of hire of ..... as a Licensed Practical Nurse (LPN), revealed that Staff A's record did not include a copy of their job description.</p> <p>During an interview conducted on ..... at 3:33pm, The Administrator confirmed the lack of a job description for Staff A in their employee record.</p> | A 161                                                                                        |                                                                                                                          |                                                                    |

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| A 161                                                                 | Continued From page 6<br><br>Class III                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | A 161                                                                                        |                                                                                                                          |                                                                    |
| A 078<br>SS=D                                                         | 59A-36.010(2) FAC Staffing Standards - Staff<br><br>(2) STAFF:<br>(a) Within 30 days after beginning employment,<br>newly hired staff must submit a written statement<br>from a health care provider documenting that the<br>individual does not have any signs or symptoms<br>of communicable . . . . . The examination<br>performed by the health care provider must have<br>been conducted no earlier than 6 months before<br>submission of the statement. Newly hired staff<br>does not include an employee transferring without<br>a break in service from one facility to another<br>when the facility is under the same management<br>or ownership.<br>1. Evidence of a negative . . . . .<br>examination must be documented on an annual<br>basis. Documentation provided by the Florida<br>Department of Health or a licensed health care<br>provider certifying that there is a shortage of<br>testing materials satisfies the annual<br>. . . . . examination requirement. An<br>individual with a positive . . . . . test must<br>submit a health care provider's statement that the<br>individual does not constitute a risk of<br>. . . . .<br>2. If any staff member has, or is suspected of<br>having, a communicable . . . . ., such individual<br>must be immediately removed from duties until a<br>written statement is submitted from a health care<br>provider indicating that the individual does not<br>constitute a risk of transmitting a communicable<br><br>(b) Staff must be qualified to perform their<br>assigned duties consistent with their level of<br>education, training, preparation, and experience. | A 078                                                                                        |                                                                                                                          |                                                                    |

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| A 078                                                                 | <p>Continued From page 7</p> <p>Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff must exercise their responsibilities, consistent with their qualifications, to observe residents, to document observations on the appropriate resident's record, and to report the observations to the resident's health care provider in accordance with this rule chapter.</p> <p>(c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C.</p> <p>(d) An assisted living facility to provide services to residents must ensure that individuals providing services are qualified to perform their assigned duties in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor must specifically describe the services the staffing agency or contractor will provide to residents.</p> <p>(e) For facilities with a licensed capacity of 17 or more residents, the facility must:</p> <ol style="list-style-type: none"> <li>1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and,</li> <li>2. Maintain time sheets for all staff.</li> </ol> <p>(f) Level 2 background screening must be conducted for staff, including staff by the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S.</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure one of four (Administrator) employee whose records was reviewed included written documentation from a health care provider stating that they are free from communicable within 6 months prior to hire or within 30 days of hire, in addition the facility failed to ensure of one of four (Administrator) employee whose record was reviewed included written</p> | A 078                                                                                        |                                                                                                                          |                                                                    |

AHCA Form 3020-0001  
STATE FORM

Agency for Health Care Administration

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| A 082                                                                 | Continued From page 9<br><br>This Statute or Rule is not met as evidenced by:<br>Based on record review and interview, the Facility<br>failed to ensure that newly hired employees had<br>the required one-time education course on<br><br>..... training<br>for two employees (Staff A and B) of four sampled<br>employees within thirty-days of employment.<br><br>Findings Included:<br><br>An employee record review for Staff A conducted<br>on ..... revealed a date of hire of<br>..... and no evidence of training on<br>/ ....<br><br>An employee record review for Staff B conducted<br>on ..... revealed a date of hire of<br>..... and no evidence of training on<br>/ ....<br><br>During interview with the Administrator,<br>conducted on ..... at 3:30pm, the<br>Administrator agreed that Staff A and Staff B did<br>not have evidence in their employee records that<br>they had completed the required training on<br>/ ....<br><br>Class III | A 082                                                                                        |                                                                                                                          |                                                                    |
| A 086<br>SS=D                                                         | 59A-36.011(10) FAC Training - ADRD<br><br>(10) ..... AND RELATED<br>("ADRD") TRAINING<br>REQUIREMENTS. Facilities which advertise that<br>they provide special care for persons with ADRD,<br>or who maintain secured areas as described in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | A 086                                                                                        |                                                                                                                          |                                                                    |

Agency for Health Care Administration

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**WESTMINSTER POINT PLEASANT**

**1533 4TH AVENUE WEST  
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| A 086                    | <p>Continued From page 10</p> <p>Chapter 4, Section 464.4.6 of the Florida Building Code, as adopted in rule 61G20-1.001, F.A.C., Florida Building Code Adopted, must ensure that facility staff receive the following training.</p> <p>(a) Facility staff who interact on a daily basis with residents with ADRD but do not provide direct care to such residents and staff who provide direct care to residents with ADRD, shall obtain 4 hours of initial training within 3 months of employment. Completion of the core training program between _____ and _____ shall satisfy this requirement. Facility staff who meet the requirements for ADRD training providers under paragraph (g) of this subsection, will be considered as having met this requirement. Initial training, entitled "_____ and Related _____ Level I Training," must address the following subject areas:</p> <ol style="list-style-type: none"> <li>1. Understanding _____'s _____ and related _____;</li> <li>2. Characteristics of _____;</li> <li>3. Communicating with residents with _____'s _____;</li> <li>4. Family issues;</li> <li>5. Resident environment; and,</li> <li>6. Ethical issues.</li> </ol> <p>(b) Staff who have successfully completed both the initial one hour and continuing three hours of ADRD training pursuant to sections 400.1755, 429.917 and 400.6045(1), F.S., shall be considered to have met the initial assisted living facility _____ and Related _____ Level I Training.</p> <p>(c) Facility staff who provide direct care to residents with ADRD must obtain an additional 4 hours of training, entitled "_____ and Related _____ Level II Training," within 9 months of employment. Facility staff who meet the requirements for ADRD training providers</p> | A 086               |                                                                                                                          |                          |

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| A 086                    | <p>Continued From page 11</p> <p>under paragraph (g) of this subsection, will be considered as having met this requirement.</p> <p>..... and Related ..... Level</p> <p>II Training must address the following subject areas as they apply to these ..... :</p> <ol style="list-style-type: none"> <li>1. Behavior management,</li> <li>2. Assistance with ADLs,</li> <li>3. Activities for residents,</li> <li>4. Stress management for the care giver; and,</li> <li>5. Medical information.</li> </ol> <p>(d) A detailed description of the subject areas that must be included in an ADRD curriculum which meets the requirements of paragraphs (a) and (b) of this subsection, can be found in the document "Training Guidelines for the Special Care of Persons with ..... 's ..... and Related .....," dated ....., incorporated by reference, available from the Department of Elder Affairs, 4040 Esplanade Way, Tallahassee, Florida 32399-7000.</p> <p>(e) Direct care staff shall participate in 4 hours of continuing education annually as required under section 429.178, F.S. Continuing education received under this paragraph may be used to meet 3 of the 12 hours of continuing education required by section 429.52, F.S., and subsection (1) of this rule, or 3 of the 6 hours of continuing education for extended congregate care required by subsection (7) of this rule.</p> <p>(f) Facility staff who have only incidental contact with residents with ADRD must receive general written information provided by the facility on interacting with such residents, as required under section 429.178, F.S., within three (3) months of employment. "Incidental contact" means all staff who neither provide direct care nor are in regular contact with such residents.</p> <p>(g) Persons who seek to provide ADRD training in accordance with this subsection must provide the</p> | A 086               |                                                                                                                          |                          |

Agency for Health Care Administration

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| A 086                                                                 | <p>Continued From page 12</p> <p>department or its designee with documentation that they hold a Bachelor's degree from an accredited college or university or hold a license as a registered nurse, and:</p> <ol style="list-style-type: none"> <li>1. Have 1 year teaching experience as an educator of caregivers for persons with _____ or related _____, or</li> <li>2. Three years of practical experience in a program providing care to persons with _____ or related _____, or</li> <li>3. Completed a specialized training program in the subject matter of this program and have a minimum of two years of practical experience in a program providing care to persons with _____ or related _____.</li> </ol> <p>(h) With reference to requirements in paragraph (g), a Master's degree from an accredited college or university in a subject related to the content of this training program can substitute for the teaching experience. Years of teaching experience related to the subject matter of this training program may substitute on a year-by-year basis for the required Bachelor's degree referenced in paragraph (g).</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to have employees trained with four-hours regarding _____'s _____ and Related (ADRD) level-I within three months of employment and level- II within nine months of employment for one employee (Staff B) of four sampled employees.</p> <p>Findings Included:</p> <p>A record review for Staff B, conducted on _____, revealed that there was no evidence in Staff B employee records that the employee completed four-hours of required training for</p> | A 086                                                                                        |                                                                                                                          |                                                                    |

Agency for Health Care Administration

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| A 086                                                                 | <p>Continued From page 13</p> <p>ARD level I within three months of employment<br/>and level- II within nine months of employment.<br/>Staff B was hired on . . . . .</p> <p>During interview with the Administrator,<br/>conducted on _____ at 3:30pm, the<br/>Administrator agreed that Staff B did not have<br/>evidence in their employee records that they had<br/>completed the required ADRD level-I and level - II</p> <p>Class III</p> | A 086                                                                                        |                                                                                                                          |  |                                                                    |