

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R-C 12/15/2022
NAME OF PROVIDER OR SUPPLIER BROOKDALE BAYSHORE			STREET ADDRESS, CITY, STATE, ZIP CODE 4902 BAYSHORE BLVD TAMPA, FL 33611		
(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 A revisit to complaint investigation (complaint number: 2022010527), a biennial re-licensure, a complaint investigation (complaint number: 2022015106 and 2022015795), a generator monitoring, and a limited nursing services monitoring visit were conducted at Brookdale Bayshore on . Deficiencies were identified at the time of survey.	{A 000}			
{A 081} SS=D	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. 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 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 (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 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. (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	{A 081}			

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{A 081}	Continued From page 2 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 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	{A 081}			

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STREET ADDRESS, CITY, STATE, ZIP CODE

BROOKDALE BAYSHORE

**4902 BAYSHORE BLVD
TAMPA, FL 33611**

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{A 081}	Continued From page 3 policies and procedures. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to maintain evidence of the required preservice orientation training for 2 (Staff A and Staff G) of the 8 employees sampled. The facility also failed to maintain evidence of the required elopement training for 3 (Administrator, Staff A, and Staff G) of the 8 employees sampled. In addition, the facility failed to maintain evidence that staff completed the required training for reporting adverse incidents/facility emergency procedures for 2 (Staff G and Staff F) of the 8 sampled employees. The facility failed to maintain evidence of the assistance with activities of daily living for 1 (Staff F) of 8 sampled employees. Furthermore, the facility failed to maintain evidence of the required residents rights/reporting/neglect/ for 3 (Staff A, Staff G, and Staff F) of the 8 sampled staff. During a record review for the Administrator who was hired on, conducted on, the Administrator's record revealed no evidence of elopement training. During a record review for Staff A who was hired on, conducted on, Staff A's record revealed no evidence of the preservice training, elopement training, rights/reporting/neglect/ training, or the required training on reporting adverse incidents/facility emergency procedures. During a record review of Staff G who was hired on, conducted on, Staff	{A 081}		

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{A 081}	Continued From page 4 G's record revealed no evidence of the preservice training, assistance with activities of daily living training, elopement training, reporting adverse incidents/facility emergency procedures training, or the training on residents rights/reporting /neglect/ . During a record review of Staff F who was hired on, conducted on, Staff F's record revealed no evidence of the reporting adverse incidents/facility emergency procedures training. Staff F's record also revealed a training called Essentials of Resident Rights training dated for for 0.5 hours which does not meet the required 1-hour training for residents rights/reporting /neglect/ . During an interview with the Business Office Coordinator, conducted on at 3:38PM, the Business Office Coordinator revealed that the facility had limited training computers which has caused them too not be current on their needed trainings. Class III	{A 081}		