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
	AL11967835	A. BUILDING: _____ B. WING _____	12/29/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PENDRY ESTATES	36120 HUFF ROAD EUSTIS, FL 32736

(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 re-licensure survey with Emergency Power Plan monitoring was conducted at Pendry Estates on , . Deficiencies were identified at the time of the survey.	A 000		
A 078	59A-36.010(2) FAC Staffing Standards - Staff (2) STAFF. (a) Within 30 days after beginning employment, newly hired staff must submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable . The examination performed by the health care provider must have been conducted no earlier than 6 months before submission of the statement. Newly hired staff does not include an employee transferring without a break in service from one facility to another when the facility is under the same management or ownership. 1. Evidence of a negative examination must be documented on an annual basis. Documentation provided by the Florida Department of Health or a licensed health care provider certifying that there is a shortage of testing materials satisfies the annual examination requirement. An individual with a positive test must submit a health care provider's statement that the individual does not constitute a risk of . 2. If any staff member has, or is suspected of having, a communicable , such individual must be immediately removed from duties until a written statement is submitted from a health care provider indicating that the individual does not constitute a risk of transmitting a communicable .	A 078		

AHCA Form 3020-0001

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

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A 078	Continued From page 1 (b) Staff must be qualified to perform their assigned duties consistent with their level of education, training, preparation, and experience. 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. (c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C. (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. (e) For facilities with a licensed capacity of 17 or more residents, the facility must: 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and, 2. Maintain time sheets for all staff. (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. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure 2 of 2 employees reviewed had evidence of a negative . . . . . examination on an annual basis (Staff A and Staff B, Health Care Assistants), and failed to ensure 1 of 2 employees reviewed obtained a written statement	A 078		

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A 078	Continued From page 2 from a health care provider documenting that the individual does not have any signs or symptoms of communicable . . . . . within 30 days after beginning employment (Staff A, Health Care Assistant.) Findings include: Review of the facility's personnel records conducted on revealed Staff A, Health Care Assistant was hired on 11/16/2022 and Staff C, Health Care Assistant was hired on . . . . Staff A's personnel record revealed no documentation of a ( ) Skin Test and no evidence of a written statement from a health care provider documenting that Staff A does not have any signs or symptoms of communicable . Staff B's personnel record revealed a test dated . . . . . , and no documentation of current test in the file. On at approximately 12:36 PM, during an interview with the Administrator, she confirmed Staff A does not have documentation of a test in her file. Regarding Staff B, the Administrator stated she thought she took an , that lasted five years, but the expired test says "skin test," so Staff B would need to take another test. Class III	A 078		
CZ841	408.823( ) FS In-person Visitation (1) This section applies to , ... centers as defined in s. 393.063, hospitals licensed under chapter 395, nursing home facilities licensed under part II of chapter 400, hospice facilities licensed under part of chapter 400, intermediate care facilities for the	CZ841		

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CZ841	Continued From page 3 licensed and certified under part VIII of chapter 400, and assisted living facilities licensed under part I of chapter 429. (2)(a) No later than 30 days after the effective date of this act, each provider shall establish visitation policies and procedures. The policies and procedures must, at a minimum, include control and education policies for visitors; screening, personal protective equipment, and other control protocols for visitors; permissible length of visits and numbers of visitors, which must meet or exceed the standards in ss. 400.022(1)(b) and 429.28(1)(d), as applicable; and designation of a person responsible for ensuring that staff adhere to the policies and procedures. Safety-related policies and procedures may not be more stringent than those established for the provider's staff and may not require visitors to submit proof of any or immunization. The policies and procedures must allow consensual physical contact between a resident, client, or patient and the visitor. (b) A resident, client, or patient may designate a visitor who is a family member, friend, guardian, or other individual as an essential caregiver. The provider must allow in-person visitation by the essential caregiver for at least 2 hours daily in addition to any other visitation authorized by the provider. This section does not require an essential caregiver to provide necessary care to a resident, client, or patient of a provider, and providers may not require an essential caregiver to provide such care. (c) The visitation policies and procedures required by this section must allow in-person visitation in all of the following circumstances, unless the resident, client, or patient objects:	CZ841		

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CZ841	Continued From page 4 1. End-of-life situations. 2. A resident, client, or patient who was living with family before being admitted to the provider ' s care is struggling with the change in environment and lack of in-person family support. 3. The resident, client, or patient is making one or more major medical decisions. 4. A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently . 5. A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver. 6. A resident, client, or patient who used to talk and interact with others is seldom speaking. 7. For hospitals, childbirth, including labor and delivery. 8. patients. (d) The policies and procedures may require a visitor to agree in writing to follow the provider's policies and procedures. A provider may suspend in-person visitation of a specific visitor if the visitor violates the provider's policies and procedures. (e) The providers shall provide their visitation policies and procedures to the agency when applying for initial licensure, licensure renewal, or change of ownership. The provider must make the visitation policies and procedures available to the agency for review at any time, upon request. (f) Within 24 hours after establishing the policies and procedures required under this section, providers must make such policies and procedures easily accessible from the homepage of their websites. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility	CZ841		

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CZ841	Continued From page 5 failed to establish visitation policies and procedures containing the minimum required information within 30 days of the effective date of this regulation. Findings include: A review of the facility's visitation policy was conducted on [redacted]. The policy, titled "Visitation Guidelines for Visitors," dated [redacted], did not include the following required information: Essential caregiver designation, visit length, consensual physical contact, and designation of a person responsible for ensuring staff adhere to the policies and procedures. Also, the visitation policy does not address in-person visitation in any of the following: end-of-life situations; a resident, client, or patient who was living with family before being admitted to the provider's care is struggling with the change in environment and lack of in-person family support; the resident, client, or patient is making one or more major medical decisions; a resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently [redacted]; if a resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver; or if a resident, client, or patient who used to talk and interact with others is seldom speaking. On [redacted], at approximately 12:29 PM during an interview with the Administrator, she stated, "This is my current visitation policy. I went on the CDC [Centers for [redacted] Control and Prevention] website, and this is what I came up with." Unclassified	CZ841		

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