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
	AL11966757	A. BUILDING: _____ B. WING _____	03/01/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LIFESTYLE LIVING #2	833 NORTH RAINBOW DRIVE HOLLYWOOD, FL 33021

(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 Relicensure and Generator Monitoring survey was conducted on [redacted] at Lifestyle Living #2. The facility had deficiencies identified related to the Relicensure at the time of the survey.	A 000		
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. 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	A 081		

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A 081	Continued From page 1 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 the following subjects: 1. Reporting adverse incidents. 2. Facility emergency procedures including	A 081		

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A 081	Continued From page 2 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 policies and procedures.	A 081		

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A 081	Continued From page 3 This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure that they provide a Preservice Orientation of at least 2 hours to all new assisted living facility employees prior to interacting with residents for 5 of 5 sampled employee personnel records reviewed, to include Staff A, Staff B, Staff C, Staff D, and Staff E. The findings included: 1) On a review of the employee personnel record was conducted. It was revealed that Staff A was hired on . She works from 6:30 AM to 6:30 PM, providing direct resident care. A review of the employee personnel file revealed that the 2-hour Preservice Orientation training certificate was not available for review in the file. 2) On a review of the employee personnel record was conducted. It was revealed that Staff B was hired on . She works from 6:30 AM to 6:30 PM, providing direct resident care. A review of the employee personnel file revealed that the 2-hour Preservice Orientation training certificate was not available for review in the file. 3) On a review of the employee personnel record was conducted. It was revealed that Staff C was hired on . She works from 6:30 PM to 6:30 AM, providing direct resident care. A review of the employee personnel file revealed that the 2-hour Preservice Orientation training certificate was not available for review in the file.	A 081		

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A 081	Continued From page 4 4) On . . . . . a review of the employee personnel record was conducted. It was revealed that Staff D was hired on . . . . . She works from 6:30 AM to 6:30 AM, providing direct resident care. A review of the employee personnel file revealed that the 2-hour Preservice Orientation training certificate was not available for review in the file. 5) On a review of the employee personnel record was conducted. It was revealed that Staff E was hired on . She works from 6:30 AM to 6:30 PM,or 6:30 PM to 6:30 AM providing direct resident care. A review of the employee personnel file revealed that the 2-hour Preservice Orientation training certificate was not available for review in the file. On . . . . . at 4:00 PM, an interview was conducted with the Administrator who acknowledged the findings and no additional documentation was provided. Class III	A 081		
A 091	59A-36.011(12) FAC Training - Documentation & Monitoring (12) TRAINING DOCUMENTATION AND MONITORING. (a) Except as otherwise noted, certificates, or copies of certificates, of any training required by this rule must be documented in the facility's personnel files. The documentation must include the following: 1. The title of the training program, 2. The subject matter of the training program, 3. The training program agenda, 4. The number of hours of the training program,	A 091		

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A 091	Continued From page 5 5. The trainee's name, dates of participation, and location of the training program, 6. The training provider's name, dated signature and credentials, and professional license number, if applicable. (b) Upon successful completion of training pursuant to this rule, the training provider must issue a certificate to the trainee as specified in this rule. (c) The facility must provide the Department of Elder Affairs and the Agency for Health Care Administration with training documentation and training certificates for review, as requested. The department and agency reserve the right to attend and monitor all facility in-service training, which is intended to meet regulatory requirements. This Statute or Rule is not met as evidenced by: Based on interview and record review the facility failed to ensure 2 of 5 employee personnel records reviewed contained the required mandatory in-service training to include Staff A and Staff E. The findings included: 1) Review of the personnel record for Staff A revealed a date of hire of [redacted] as Direct Care Personnel to work the 6:30 AM to 6:30 PM shift. Further review of the personnel record revealed the 1-hour in service training pertaining to Reporting Major Incidents, Reporting Adverse Incidents, Facility Emergency Procedures and 1-hour in service training pertaining to Incident Reporting were not available for review. 2) Review of the personnel record for Staff E revealed a date of hire of [redacted] as Direct Care Personnel to work the 6:30 AM to 6:30 PM	A 091		

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A 091	Continued From page 6 or 6:30 PM to 6:30 AM shift. Further review of the personnel record revealed the 1-hour in service training pertaining to Reporting Major Incidents, Reporting Adverse Incidents, Facility Emergency Procedures and 1-hour in service training pertaining to Incident Reporting were not available for review. On . . . . . at 4:15 PM, an interview was conducted with the Administrator who acknowledged the personnel records did not include the required training documentation. Class III	A 091		