

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967423	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/01/2023
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

SUNSHINE SENIOR CARE SERVICES

**1730 NW 111TH TERRACE
PEMBROKE PINES, FL 33026**

(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 at Sunshine Senior Care Services. Deficiencies were 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		

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 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 blood borne pathogens, 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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NAME OF PROVIDER OR SUPPLIER SUNSHINE SENIOR CARE SERVICES			STREET ADDRESS, CITY, STATE, ZIP CODE 1730 NW 111TH TERRACE PEMBROKE PINES, FL 33026		
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A 081	Continued From page 3 This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure 2 out of 5 sampled direct care staff, Staff A and Staff D did not complete the mandatory in-service training as required within 30 days of employment. The findings included: 1) Review of Staff A's employee file revealed she was hired on as a Caregiver to work the 7:00 AM to 7:00 PM shift. Caregiver Staff A was observed attending to residents' needs on Further review of her employee file revealed it did not contain documentation of the required training on Resident Rights and Recognizing and Reporting and Neglect. 2) Review of Staff D's employee file revealed she was hired on as a Caregiver to work the 7:00 AM to 7:00 PM shift. Caregiver Staff D was observed attending to residents' needs on Further review of her employee file revealed it did not contain documentation of the required training on Control, Elopement Response, and Incident Reporting. On at approximately 4:42 PM, the Administrator was notified via telephone of the missing training documentation for Staff A, and Staff D. She did not provide additional information or resources for documentation. Class III	A 081			

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A 082	Continued From page 4	A 082		
A 082	59A-36.011(4) FAC Training - / (4) ... (/). Pursuant to section 381.0035, F.S., all facility employees, with the exception of employees subject to the requirements of section 456.033, F.S., must complete a one-time education course on and , including the topics prescribed in the section 381.0035, F.S. New facility staff must obtain the training within 30 days of employment. Documentation of compliance must be maintained in accordance with subsection (12), of this rule. This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure 1 out of 5 sampled direct care staff, Staff C, had obtained the (/) training within 30 days of hire. The findings included: Review of Staff C's employee file revealed she was hired on as a Caregiver to work the 7:00 AM to 7:00 PM shift. Caregiver Staff C was observed attending to residents' needs on . Further review of her employee file revealed it did not contain a certificate of completion of / training as required. On at 4:44 PM, the Administrator was advised via telephone of the finding. There was no additional documentation provided at the time of the survey. Class III	A 082		

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A 083	59A-36.011(5) FAC Training - First Aid and (5) FIRST AID AND (). A staff member who has completed courses in First Aid and and holds a currently valid card documenting completion of such courses must be in the facility at all times. (a) Documentation that the staff member possess current certification that requires the student to demonstrate, in person, that he or she is able to perform and which is issued by an instructor or training provider that is approved to provide training by the American Red Cross, the American Association, the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education satisfies this requirement. (b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, Part III, F.S., shall be considered as having met the training requirements for both First Aid and C.P.R. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to have 1 out of 5 sampled staff complete the required course in () training, specifically Staff B. The findings included: Review of Staff B's employee file revealed she was hired on as a Caregiver to work the 7:00 AM to 7:00 PM shift. Caregiver Staff B was observed attending to residents' needs on . Further review of her employee file	A 083	

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A 083	Continued From page 6 revealed it did not contain training as required. On at 4:44 PM, the Administrator was advised via telephone of the finding. There was no additional documentation provided at the time of the survey. Class III	A 083		