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
	AL11969472	A. BUILDING: _____ B. WING _____	05/01/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
UNITED LIVES LEISURE FACILITIES, INC	24167 SW 114TH CT HOMESTEAD, FL 33032

(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 AMENDED: A biennial re-licensure survey, with a limited mental health component, was conducted at United Lives Leisure Facilities, Inc. on . . . . . Deficiencies were identified at the time of the survey.	A 000		
A 078 SS=E	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	A 078		

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A 078	Continued From page 1 constitute a risk of transmitting a communicable (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 observation, record review and interview, the facility failed to ensure staff were qualified to perform their assigned duties consistent with the level of education, training,	A 078		

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A 078	Continued From page 2 preparation, and experience for two out of two sampled staff (Staff C and Staff D). Staff C unable to explain what is /how to perform and Staff D unable to explain elopement and elopement drills. Findings Included; Observation on at 6:37 AM showed Staff C (live-in caretaker) working at the facility alone with six residents. Interviewed on at 6:37AM, when asked to explain , , ( ) and how to perform , Staff C (Caregiver) was unable to explain ( ), including how to perform . Staff C (Caregiver) stated that she does not need to know how to do because all the residents had ( ). A review of Staff C's (Caregiver) personnel record showed a hired date of and training dated with an expiration date of . Interviewed on at 4:29 PM with Staff D, when asked what is elopement and elopement drills, Staff D (Caregiver) was unable to explain and remained silent. A review of Staff D's (Caregiver) personnel records showed a hired date of and elopement training dated . On at 12:50, concerning staff unable to explain , the Owner stated, she [Staff C]. was nervous. Class III	A 078		

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A 182 SS=D	59A-36.019(3) FAC Emergency Mgmt - Plan Implementation (3) PLAN IMPLEMENTATION. (a) All staff must be trained in their duties and are responsible for implementing the emergency management plan. (b) If telephone service is not available during an emergency, the facility must request assistance from local law enforcement or emergency management personnel in maintaining communication. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to ensure that all staff were trained in their duties and responsible for implementing the emergency management plan . Staff decline to start the alternate power source (portable generator) that would be used to cool the facility in the event of loss of power. Findings: Observation on at 6:37 AM showed Staff C (live-in caregiver) working alone at the facility with a census of six residents. On at 6:37 AM observed a (Duromax XP10000EH portable generator located in the garage. On at 6:37 AM, Staff C (live-in caretaker) was asked to relocate the generator away from the facility and start it. Staff C did want to relocate the generator and start it. A review of Staff C's (Caregiver) personnel records showed a hired date . Further review of the record revealed a training certificate	A 182		

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A 182	Continued From page 4 in Understanding Facility's Emergency Environmental Control Plan dated . Interviewed on at 7:10 AM, concerning Staff C, who was working alone and decline to start the generator, the Owner stated the staff did not understand when she was asked to turn on the generator. Class III	A 182		