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 |
|---|---|---|---|
| | AL11910686 | A. BUILDING: _____ B. WING _____ | 07/25/2023 |

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| INDEPENDENCE HALL | 1639 NE 26TH STREET WILTON MANORS, FL 33305 |

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| A 000 | Initial Comments<br><br>An unannounced Change of Ownership (CHOW), Complaint (#2022012819 and #2022017936) and Generator Monitoring survey was conducted on . . . . . at Independence Hall. The facility had deficiencies related to the Change of Ownership at the time of the survey. | A 000 | | |
| A 081 | 429.52(1 & 7) FS; 59A-36.011( . . ) FAC Training - Staff In-Service<br><br>429.52(1)<br>(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.<br><br>(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.<br><br>59A-36.011<br>(2) STAFF PRESERVICE ORIENTATION.<br>(a) Facilities must provide a preservice orientation of at least 2 hours to all new assisted | A 081 | | |

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| A 081 | Continued From page 1<br>living facility employees who have not previously completed core training as detailed in subsection (1).<br>(b) New staff must complete the preservice orientation prior to interacting with residents.<br>(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.<br>(d) In addition to topics that may be chosen by the facility administrator, the preservice orientation must cover:<br>1. Resident's rights; and,<br>2. The facility's license type and services offered by the facility.<br>(3) STAFF IN-SERVICE TRAINING. Facility administrators or managers shall provide or arrange for the following in-service training to facility staff:<br>(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 [illegible] control, including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use its [illegible] control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to [illegible] borne [illegible], may be used to meet this requirement.<br>(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:<br>1. Reporting adverse incidents. | A 081 | | |

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| A 081 | Continued From page 2<br><br>2. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation.<br>(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:<br>1. Resident rights in an assisted living facility.<br>2. Recognizing and reporting resident , neglect, and , . . . . . . The facility must use its prevention policies and procedures when offering this training.<br>(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:<br>1. Resident behavior and needs.<br>2. Providing assistance with the activities of daily living.<br>(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.<br>(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.<br>1. All facility staff shall be provided with a copy of the facility's resident elopement response policies and procedures.<br>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<br><br>This Statute or Rule is not met as evidenced by:<br>Based on the employee record review and interview revealed the facility failed to ensure that 3 out of 4 staff completed the required mandatory training, specifically Staff B, Staff F and Staff G.<br><br>The findings included:<br><br>On at 12:38 PM, the employee records were received and a request was made for the complete files, however all that was provided were thin manilla folders.<br><br>An employee record review for Staff B, with a date of hire of as a Registered Nurse to work the 7:00 AM to 3:00 PM shift, revealed that Staff B did not have Reporting Major Incidents, Reporting Adverse Incidents, Facility Emergency Procedures, and Incident Reporting Training in her employee record available for review.<br><br>An employee record review for Staff F, with a date of hire of as a Home Health Aid/Medication Technician to work the 11:00 PM to 7:00 AM shift, revealed that Staff F did not have Reporting Major Incidents, Reporting Adverse Incidents, Facility Emergency Procedures, Incident Reporting Training, Resident Rights and Recognizing/Reporting . . . . /Neglect Training in her employee record. Further the 2 hours of Preservice Orientation to be completed prior to interacting with residents was not in her employee record available for review.<br><br>An employee record review for Staff G, with a date of hire of as a Medication | A 081 | | |

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| A 081 | Continued From page 4<br><br>Technician to work the 3:00 PM to 11:00 PM shift, revealed that Staff G did not have Reporting Major Incidents, Reporting Adverse Incidents, Facility Emergency Procedures, and Incident Reporting Training in her employee record available for review.<br><br>On at 4:23 PM, the survey team met with the President to conduct the exit conference to discuss the findings. The President stated the employee records have been thinned and he will have the Corporate Human Resource Staff locate the thinned paperwork for the employee's records. No further information was provided at the time.<br><br>Class III | A 081 | | |
| A 084 | 59A-36.011(6) FAC 429.52(6), FS Training - Assis Self-Admin Meds & Med Mgmt<br><br>59A-36.011<br>(6) ASSISTANCE WITH THE SELF-ADMINISTRATION OF MEDICATION AND MEDICATION MANAGEMENT. Unlicensed persons who will be providing assistance with the self-administration of medications as described in rule 59A-36.008, F.A.C., must meet the training requirements pursuant to section 429.52(6), F.S., prior to assuming this responsibility. Courses provided in fulfillment of this requirement must meet the following criteria:<br>(a) Training must cover state law and rule requirements with respect to the supervision, assistance, administration, and management of medications in assisted living facilities; procedures and techniques for assisting the resident with self-administration of medication including how to read a prescription label; | A 084 | | |

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| A 084 | Continued From page 5<br>providing the right medications to the right resident; common medications; the importance of taking medications as prescribed; recognition of side effects and adverse reactions and procedures to follow when residents appear to be experiencing side effects and adverse reactions; documentation and record keeping; and medication storage and disposal. Training shall include demonstrations of proper techniques, including techniques for control, and ensure unlicensed staff have adequately demonstrated that they have acquired the skills necessary to provide such assistance.<br>(b) The training must be provided by a registered nurse or licensed pharmacist who shall issue a training certificate to a trainee who demonstrates, in person and both physically and verbally, the ability to:<br>1. Read and understand a prescription label;<br>2. Provide assistance with self-administration in accordance with section 429.256, F.S., and rule 59A-36.008, F.A.C., including:<br>a. Assist with oral dosage forms, , , dosage forms, and , , , and dosage forms;<br>b. Measure liquid medications, break scored tablets, and crush tablets in accordance with prescription directions;<br>c. Recognize the need to obtain clarification of an "as needed" prescription order;<br>d. Recognize a medication order which requires judgment or discretion, and to advise the resident, resident's health care provider or facility employer of inability to assist in the administration of such orders;<br>e. Complete a medication observation record;<br>f. Retrieve and store medication;<br>g. Recognize the general signs of adverse reactions to medications and report such | A 084 | | |

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| A 084 | Continued From page 6<br>reactions;<br>h. Assist residents with syringes that are prefilled with the proper dosage by a pharmacist and , that are prefilled by the manufacturer by taking the medication, in its previously dispensed, properly labeled container, from where it is stored, and bringing it to the resident for self-injection;<br>i. Assist with ;<br>j. Use a to perform testing;<br>k. Assist residents with and continuous positive airway pressure (CPAP) devices, excluding the titration of the levels;<br>l. Apply and remove stockings and hosiery;<br>m. Placement and removal of bags, excluding the removal of the or manipulation of the site; and,<br>n. Measurement of rate, temperature, and , rate.<br>(c) Unlicensed persons, as defined in section 429.256(1)(b), F.S., who provide assistance with self-administered medications and have successfully completed the initial 6 hour training, must obtain, annually, a minimum of 2 hours of continuing education training on providing assistance with self-administered medications and safe medication practices in an assisted living facility. The 2 hours of continuing education training may be provided online.<br>(d) Trained unlicensed staff who, prior to the effective date of this rule, assist with the self-administration of medication and have successfully completed 4 hours of assistance with self-administration of medication training must complete an additional 2 hours of training that focuses on the topics listed in | A 084 | | |

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| A 084 | Continued From page 7<br><br>sub-subparagraphs (6)(b)2.h.-n. of this section, before assisting with the self-administration of medication procedures listed in sub-subparagraphs (6)(b)2.h.-n.<br><br>429.52<br>(6) Staff assisting with the self-administration of medications under s. 429.256 must complete a minimum of 6 additional hours of training provided by a registered nurse or a licensed pharmacist before providing assistance. Two hours of continuing education are required annually thereafter. The agency shall establish by rule the minimum requirements of this training<br><br>This Statute or Rule is not met as evidenced by:<br>Based on employee record review and interview, it was determined that the facility failed to ensure all staff that assist residents with self-administration of medications had completed the annual update medication training , for 1 out of 4 sampled employee records reviewed, specifically Staff F.<br><br>The findings included:<br><br>Review of Staff F's employee record, revealed a hire date of . . . . . as a Medication Technician to work the 11:00 PM to 7:00 AM shift. Further review of the employee record revealed a 6-hour training on assistance with self-administration of medications dated . . . . . There were no certificates for the 2 hours of annual updates available for review for 2022 or 2023.<br><br>During an interview conducted with the President of the facility on at 4:23 PM , he stated that he was unsure why the annual medication training was not in the employee | A 084 | | |

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| A 084 | Continued From page 8<br><br>record. He stated, he will attempt to locate it with the Human Resource Director. At the time of exiting the facility, no further documentation was provided.<br><br>Class III | A 084 | | |
| A 090 | 59A-36.011(11) FAC Training -<br><br>(11) [redacted]<br>TRAINING.<br>(a) Currently employed facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policies and procedures regarding [redacted].<br>(b) Newly hired facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policy and procedures regarding [redacted] within 30 days after employment.<br>(c) Training shall consist of the information included in rule 59A-36.009, F.A.C.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on employee record reviews and interview, it was determined that the facility failed to ensure that all staff had completed training on the facility Policy and Procedure regarding [redacted] ( ), for 3 of 4 sampled employee records reviewed, specifically Staff B, Staff F and Staff G.<br><br>The findings included:<br><br>Review of Registered Nurse Staff B's employee record revealed a hire date of [redacted] to work | A 090 | | |

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| A 090 | Continued From page 9<br><br>the 7:00 AM to 3:00 PM shift. The employee record did not contain documentation to indicate Staff B received training on the facility's Policy and Procedure regarding .<br><br>Review of Home Health Aide/Medication Technician Staff F's employee record revealed a hire date of to work the 11:00 PM to 7:00 AM shift. The employee record did not contain documentation to indicate Staff F received training on the facility's Policy and Procedure regarding .<br><br>Review of Medication Technician Staff G's employee record revealed a hire date of to work the 3:00 PM to 11:00 PM shift. The employee record did not contain documentation to indicate Staff G received training on the facility's Policy and Procedure regarding . .<br><br>On at 4:23 PM, during an interview conducted with the President of the facility, he stated the employee records were thinned and he is unsure where the training certificates were.<br><br>Class III | A 090 | | |
| A 161 | 429.275(2) FS; 59A-36.015(2) FAC Records - Staff<br><br>429.275<br>(2) The administrator or owner of a facility shall maintain personnel records for each staff member which contain, at a minimum, documentation of background screening, if applicable, documentation of compliance with all training requirements of this part or applicable rule, and a copy of all licenses or certification held | A 161 | | |

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| A 161 | Continued From page 10<br>by each staff who performs services for which licensure or certification is required under this part or rule.<br><br>59A-36.015<br>(2) STAFF RECORDS.<br>(a) Personnel records for each staff member must contain, at a minimum, a copy of the employment application, with references furnished, and documentation verifying freedom from signs or symptoms of communicable . In addition, records must contain the following, as applicable:<br>1. Documentation of compliance with all staff training and continuing education required by Rule 59A-36.011, F.A.C.,<br>2. Copies of all licenses or certifications for all staff providing services that require licensing or certification,<br>3. Documentation of compliance with level 2 background screening for all staff subject to screening requirements as specified in Section 429.174, F.S., and Rule 59A-36.010, F.A.C.,<br>4. For facilities with a licensed capacity of 17 or more residents, a copy of the job description given to each staff member pursuant to Rule 59A-36.010, F.A.C.,<br>5. Documentation verifying direct care staff and administrator participation in resident elopement drills pursuant to paragraph 59A-36.007(8)(c), F.A.C.<br>(b) The facility is not required to maintain personnel records for staff provided by a licensed staffing agency or staff employed by an entity to provide direct or indirect services to residents and the facility. However, the facility must maintain a copy of the contract between the facility and the staffing agency or contractor as described in Rule 59A-36.010, F.A.C. | A 161 | | |

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| A 161 | Continued From page 11<br><br>(c) The facility must maintain the written work schedules and staff time sheets for the most current 6 months as required by Rule 59A-36.010, F.A.C.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on employee record review and interview the facility failed to ensure 2 of 4 employee records reviewed had a signed Job Description in the employee's record, specifically Staff F and Staff G.<br><br>The findings included:<br><br>Review of the employee record for Home Health Aide/Medication Technician Staff F revealed a hire date of to work the 11:00 PM to 7:00 AM shift. There was no documented evidence of a signed Job Description in the employee record.<br><br>Review of the employee record for Medication Technician Staff G revealed a hire date of to work the 3:00 PM to 11:00 PM shift. There was no documented evidence of a signed Job Description in the employee record.<br><br>In an interview conducted with the President on at 4:23 PM, he stated that he is unsure why the Job Descriptions are not in the employee records, further stating the employee records were thinned. No additional documentation was provided during the survey.<br><br>Class | A 161 | | |