

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11970301	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 03/12/2024
NAME OF PROVIDER OR SUPPLIER NEW MELODY SL LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 2216 MISCINDY PL ORLANDO, FL 32806			
(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 CAPACITY A capacity increase survey was conducted at New Melody SL LLC on _____. The facility had deficiencies at the time of the visit.	A 000			
A 004 SS=A	59A-36.004 FAC Licensure - Requirements 59A-36.004 License Requirements. (1) SERVICE PROHIBITION. An assisted living facility may not represent that it provides any service other than a service for which it is licensed to provide. (2) CHANGE IN USE OF SPACE REQUIRING AGENCY CENTRAL OFFICE APPROVAL. A change in the use of space that increases or decreases a facility's capacity must not be made without prior approval from the Agency Central Office. Approval must be based on the compliance with the physical plant standards provided in Rule 59A-36.014, F.A.C., as well as documentation of compliance with applicable fire safety and sanitation inspection requirements referenced in Rule 59A-36.005, F.A.C. (3) CHANGE IN USE OF SPACE REQUIRING AGENCY FIELD OFFICE APPROVAL. A change in the use of space that involves converting an area to resident use, which has not previously been inspected for such use, must not be made without prior approval from the Agency Field Office. Approval must be based on compliance with the physical plant standards provided in Rule 59A-36.014, F.A.C., as well as documentation of compliance with applicable fire safety and sanitation inspection standards referenced in Rule 59A-36.005, F.A.C. (4) CONTIGUOUS PROPERTY. If a facility consists of more than one building, all buildings	A 004			

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A 004	Continued From page 1 included under a single license must be on contiguous property. "Contiguous property" means property under the same ownership separated by no more than a two-lane street that traverses the property. A licensed location may be expanded to include additional contiguous property with the approval of the agency to ensure continued compliance with the requirements and standards of Chapters 408, Part II, 429, Part I, F.S. and rule Chapter 59A-35, F.A.C., and this rule chapter. (5) PROOF OF INSPECTIONS. A copy of the annual fire safety and sanitation inspections described in Rule 59A-36.005, F.A.C., must be submitted annually to the Agency Central Office. The annual inspections must be submitted no later than 30 calendar days after the inspections. Failure to comply with this requirement may result in administrative action pursuant to Chapter 408, part II, and Section 429.14, F.S., and rule Chapter 59A-35, F.A.C. (6) RESIDENTS RECEIVING STATE-FUNDED SERVICES. Upon request, the facility administrator or designee must identify residents receiving state-funded services to the agency and the department for monitoring purposes authorized by state and federal laws. This Statute or Rule is not met as evidenced by: Based on observation, interviews and record reviews, the facility failed to obtain documentation of compliance with applicable fire safety and sanitation inspection standards for a change in the use of space that increases the facility's capacity. Findings: On at 12:30pm observation and tour of the facility revealed adequate space for the	A 004			

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

NEW MELODY SL LLC

**2216 MISCINDY PL
ORLANDO, FL 32806**

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A 004	Continued From page 2 capacity increase. Staff A was asked to provide the staff schedule, new group care and new fire and safety inspections. On at 12:33pm Staff A stated we already had the inspections done. What do you mean new? We did not have any new inspections done for the increase. We've already increased the staffing which will accommodate 6 residents. Review of the Orange County Certificate of Occupancy dated stated, "Special Conditions: use permit for Assisted Living Facility Five or fewer persons only-"New Melody Senior Living. R3 Assisted Living - Five or fewer Persons Receiving Care." Review of the Department of Health Group Care revealed the last inspection was conducted on with a Satisfactory. Review of the Orange County Fire and Rescue Department revealed the last inspection was conducted on On at 12:40pm Upon the Administrator's arrival at the facility. A discussion was conducted regarding the requirements of obtaining new inspections for Department of Health Group Care and Fire and Safety Inspection for the capacity increase. On at 12:55pm The Administrator stated I didn't know I needed new inspections based on the fact the prior facility was licensed for 6 beds by Agency for Health Care Administration (AHCA) and was already on file. When I contacted AHCA it was stated I only needed to provide the city zoning when	A 004		

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A 004	Continued From page 3 submitting my application. I did all my due diligence by contacting my consultant, other facilities and attorneys who stated I did not need to complete those steps based on the city ordinance. On at 1:15pm The Administrator and Staff A confirmed the findings. Class	A 004			
A 077 SS=D	429.176 FS; 429.52(),59A-36.01(1) FAC Staffing Standards - Administrators 429.176 Notice of change of administrator.-If, during the period for which a license is issued, the owner changes administrators, the owner must notify the agency of the change within 10 days and provide documentation within 90 days that the new administrator meets educational requirements and has completed the applicable core educational requirements under s. 429.52. A facility may not be operated for more than 120 consecutive days without an administrator who has completed the core educational requirements. 429.52 (4) A facility administrator must complete the required core training, including the competency test, within 90 days after the date of employment as an administrator. Failure to do so is a violation of this part and subjects the violator to an administrative fine as prescribed in s. 429.19. Administrators licensed in accordance with part II of chapter 468 are exempt from this requirement. Other licensed professionals may be exempted, as determined by the agency by rule. (5) Administrators are required to participate in	A 077			

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A 077	Continued From page 4 continuing education for a minimum of 12 contact hours every 2 years. 59A-36.010 (1) ADMINISTRATORS. Every facility must be under the supervision of an administrator who is responsible for the operation and maintenance of the facility including the management of all staff and the provision of appropriate care to all residents as required by chapters 408, part II, 429, part I, F.S., and rule chapter 59A-35, F.A.C., and this rule chapter. (a) An administrator must: 1. Be at least _____ ; 2. If employed on or after _____, have, at a minimum, a high school diploma or G.E.D.; 3. Be in compliance with Level 2 background screening requirements pursuant to sections 408.809 and 429.174, F.S.; 4. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C., no later than 90 days after becoming employed as a facility administrator. Administrators who attended core training prior to _____, are not required to take the competency test unless specified elsewhere in this rule; and, 5. Satisfy the continuing education requirements pursuant to rule 59A-36.011, F.A.C. Administrators who are not in compliance with these requirements must retake the core training and core competency test requirements in effect on the date the non-compliance is discovered by the agency or the department. (b) In the event of extenuating circumstances, such as the _____ of a facility administrator, the agency may permit an individual who otherwise has not satisfied the training requirements of	A 077			

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A 077	Continued From page 5 subparagraph (1)(a)4. of this rule, to temporarily serve as the facility administrator for a period not to exceed 90 days. During the 90 day period, the individual temporarily serving as facility administrator must: 1. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C.; and, 2. Complete all additional training requirements if the facility maintains licensure as an extended congregate care or limited mental health facility. (c) Administrators may supervise a maximum of either three assisted living facilities or a group of facilities on a single campus providing housing and health care Administrators who supervise more than one facility must appoint in writing a separate manager for each facility. However, an administrator supervising a maximum of three assisted living facilities, each licensed for 16 or fewer beds and all within a 15 mile of each other, is only required to appoint two managers to assist in the operation and maintenance of those facilities. (d) An individual serving as a manager must satisfy the same qualifications, background screening, core training and competency test requirements, and continuing education requirements as an administrator pursuant to paragraph (1)(a) of this rule. Managers who attended the core training program prior to _____, are not required to take the competency test unless specified elsewhere in this rule. In addition, a manager may not serve as a manager of more than a single facility, except as provided in paragraph (1)(c) of this rule, and may not _____ serve as an administrator of any other facility. (e) Pursuant to section 429.176, F.S., facility owners must notify the Agency Central Office	A 077			

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A 077	Continued From page 6 within 10 days of a change in facility administrator on the Notification of Change of Administrator form, AHCA Form 3180-1006, _____, which is incorporated by reference and available online at: http://www.flrules.org/Gateway/reference.asp?No=Ref-09393. This Statute or Rule is not met as evidenced by: Based on interviews and the facility's background roster screening, the facility failed to notify the Agency within 10 business days of the change in administrators. Findings: On _____ at 12:22pm upon arrival at the facility Staff A identified herself as the administrator. Staff A was asked if she recently was hired as her name did not appear in FloridaHealthFinder.gov. On _____ at 12:25pm Staff A stated I don't know anything about that. I have been here since the 22nd of _____, and the Administrator was supposed to make the changes. I will contact him to come to the facility. Review of the Facility's Background Roster revealed staff A was hired on _____ and was identified as the Administrator. On _____ at 12:40pm The Administrator arrived at the facility and confirmed that Staff A was the new Administrator, and he was the owner. On _____ at 1:15pm The Administrator	A 077		

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A 077	Continued From page 7 confirmed the findings. Class III	A 077			