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
	AL11968698	A. BUILDING: _____ B. WING _____	R-C 03/13/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VOLANTE OF ST. PETERSBURG	3600 34TH STREET SOUTH SAINT PETERSBURG, FL 33711

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{A 000}	Initial Comments A re-visit to complaint investigation (complaint number: 2023015621 and 2023017303) was conducted at La Orilla of St. Petersburg also known as Volante of St. Petersburg on . Deficiencies were identified at the time of survey.	{A 000}		
{A 081} SS=D	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	{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 living facility employees who have not previously 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.	{A 081}		

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{A 081}	Continued From page 2 2. Facility emergency procedures including 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 record review and interview, the facility failed to ensure staff had the required 2-hour pre-service orientation within 30-days of employment for one (Staff A) of the two sampled Staff. Findings include: A record review of Staff A, Caregiver's employee record, conducted on revealed that Staff A was hired on and had no evidence of a 2-hour pre-service training. During an interview with the Administrator, conducted via cellphone on at 11:44AM, the Administrator confirmed that the Pre-Service had not been completed. Class III	{A 081}		
A 170 SS=D	429.24(3)a Resident Refund Policy ....The facility shall provide a refund to the resident or responsible party within 45 days after the transfer, discharge, or of the resident. The agency shall impose a fine upon a facility that fails to comply with the refund provisions of the paragraph, which fine shall be equal to three times the amount due to the resident. One-half of the fine shall be remitted to the resident or his or her estate, and the other half to the Health Care Trust Fund to be used for the purpose specified in s. 429.18. This Statute or Rule is not met as evidenced by:	A 170		

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A 170	Continued From page 4 Based on record review and interview, the facility failed to issue a full refund within 45-days of discharge for one (Resident #7) of the one sampled residents. Findings included: A record review of Resident #7's record, conducted on . . . . . , revealed that Resident # 7 was admitted on and discharged to a local hospital on . . . . . . A record review of Resident #7's hospital discharge record dated , conducted on . . . . . revealed that the assisted living facility had declined to readmit Resident #7. A record review of the facility's ledger, conducted on . . . . . revealed that Resident #7 was billed $9,590 for the month of , and . . . . The facility ledger showed a partial refund of $2,938.87 issued on which was later than the required 45 days as did not satisfy the full amount owed, leaving $3,134.80 remaining due to Resident #7. A record review of Resident #7's moving company receipt, conducted on revealed that all items were removed on . A record review of the signed contract for Resident #7, conducted on . . . . . revealed that the contract dated stated that the move out date is defined as when the property was removed. During an interview with the Administrator, conducted on at 10:38AM via cell phone, the Administrator stated that they were	A 170		

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A 170	Continued From page 5 unsure when the resident's belongings were moved out because it was prior to the current administration working there. Class III	A 170		

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