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
	AL11964066	A. BUILDING: _____ B. WING _____	06/03/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARING VILLAGE OF DAVIE	4681 SW 66TH AVENUE DAVIE, FL 33314

(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 licensure Complaint survey (#2024003818) was conducted on . . . . . at Caring Village of Davie. The facility had deficiencies identified that were unrelated to the Complaint.	A 000		
A 026	59A-36.007(2) FAC Resident Care - Social & Leisure Activities (2) SOCIAL AND LEISURE ACTIVITIES. Residents shall be encouraged to participate in social, recreational, educational and other activities within the facility and the community. (a) The facility must provide an ongoing activities program. The program must provide diversified individual and group activities in keeping with each resident's needs, abilities, and interests. (b) The facility must consult with the residents in selecting, planning, and scheduling activities. The facility must demonstrate residents' participation through one or more of the following methods: resident meetings, committees, a resident council, a monitored suggestion box, group discussions, questionnaires, or any other form of communication appropriate to the size of the facility. (c) Scheduled activities must be available at least 6 days a week for a total of not less than 12 hours per week. Watching television is not an activity for the purpose of meeting the 12 hours per week of scheduled activities unless the television program is a special one-time event of special interest to residents of the facility. A facility whose residents choose to attend day programs conducted at adult day care centers, senior centers, mental health centers, or other day programs may count those attendance hours towards the required 12 hours per week of scheduled activities. An activities calendar must	A 026		

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A 026	Continued From page 1 be posted in common areas where residents normally congregate. (d) If residents assist in planning a special activity such as an outing, seasonal festivity, or an excursion, up to 3 hours may be counted toward the required activity time. This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure that scheduled activities are available at least 6 days a week for a total of not less than 12 hours per week. The findings include: The facility admits residents with 's, , and related . . . . However, there are no diversified programs designed to meet each residents' individual needs, abilities, and interests. On observations made during the survey revealed residents' only activity was watching an endless loop of sing-along songs on the mounted flat panel TV in the Activity/Dining room area. On at 9:48 AM, an observation was made of 6 residents in the dining room/activity area of the facility watching TV that was playing a sing-along song. On . . . . . at 9:57 AM, an observation was made of a resident sitting in a leather-like recliner in the TV room section located near the . . . of the facility. There were no activities being conducted in the area. On at 11:17 AM, an observation was made of 6 residents in the dining room/activity	A 026		

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A 026	Continued From page 2 area of the facility watching TV that was playing a sing-along. On at 1:57 PM, an observation made of 5 residents sitting at the dining room table watching TV as it played sing-along songs. On at 2:46 PM, an observation made of 5 residents sitting at the dining room table watching TV as it played sing-along songs. On at 3:33 PM, an observation made of 5 residents sitting at the dining room table watching TV as it played sing-along songs. No other activities were observed during the survey. Class III	A 026		
A 079	59A-36.010(3) FAC Staffing Standards - Levels (3) STAFFING STANDARDS. (a) Minimum staffing: 1. Facilities must maintain the following minimum staff hours per week: Number of Residents, Day Care Participants, and Respite Care Residents Staff Hours/Week 0-5 168 6-15 212 16-25 253 26-35 294 36-45 335 46-55 375 56-65 416 66-75 457 76-85 498 86-95 539 For every 20 total combined residents, day care	A 079		

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A 079	Continued From page 3 participants, and respite care residents over 95 add 42 staff hours per week. 2. Independent living residents, as referenced in subsection 59A-36.015(3), F.A.C., who occupy beds included within the licensed capacity of an assisted living facility but do not receive personal, limited nursing, or extended congregate care services, are not counted as residents for purposes of computing minimum staff hours. 3. At least one staff member who has access to facility and resident records in case of an emergency must be in the facility at all times when residents are in the facility. Residents serving as paid or volunteer staff may not be left solely in charge of other residents while the facility administrator, manager or other staff are absent from the facility. 4. In facilities with 17 or more residents, there must be at least one staff member awake at all hours of the day and night. 5. 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 of attendance at First Aid or courses pursuant to subsection 59A-36.011(5), F.A.C., satisfies this requirement. b. A nurse is considered as having met the course requirements for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, part III, F.S., is considered as having met the course requirements for both First Aid and . 6. During periods of temporary absence of the administrator or manager of more than 48 hours when residents are on the premises, a staff member who is at least , must be physically present and designated in writing to be	A 079		

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A 079	Continued From page 4 in charge of the facility. No staff member shall be in charge of a facility for a consecutive period of 21 days or more, or for a total of 60 days within a calendar year, without being an administrator or manager. 7. Staff whose duties are exclusively building or grounds maintenance, clerical, or food preparation do not count towards meeting the minimum staffing hours requirement. 8. The administrator or manager's time may be counted for the purpose of meeting the required staffing hours, provided the administrator or manager is actively involved in the day-to-day operation of the facility, including making decisions and providing supervision for all aspects of resident care, and is listed on the facility's staffing schedule. 9. Only on-the-job staff may be counted in meeting the minimum staffing hours. Vacant positions or absent staff may not be counted. (b) Notwithstanding the minimum staffing requirements specified in paragraph (a), all facilities, including those composed of apartments, must have enough qualified staff to provide resident supervision, and to provide or arrange for resident services in accordance with the residents' scheduled and unscheduled service needs, resident contracts, and resident care standards as described in rule 59A-36.007, F.A.C. (c) The facility must maintain a written work schedule that reflects its 24-hour staffing pattern for a given time period. Upon request, the facility must make the daily work schedules of direct care staff available to residents or their representatives. (d) The facility must provide staff immediately when the agency determines that the requirements of paragraph (a) are not met. The	A 079		

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A 079	Continued From page 5 facility must immediately increase staff above the minimum levels established in paragraph (a), if the agency determines that adequate supervision and care are not being provided to residents, resident care standards described in rule 59A-36.007, F.A.C., are not being met, or that the facility is failing to meet the terms of residents' contracts. The agency will consult with the facility administrator and residents regarding any determination that additional staff is required. Based on the recommendations of the local fire safety authority, the agency may require additional staff when the facility fails to meet the fire safety standards described in rule chapter 69A-40, F.A.C., until such time as the local fire safety authority informs the agency that fire safety requirements are being met. 1. When additional staff is required above the minimum, the agency will require the submission of a corrective action plan within the time specified in the notification indicating how the increased staffing is to be achieved to meet resident service needs. The plan will be reviewed by the agency to determine if it sufficiently increases the staffing levels to meet resident needs. 2. When the facility can demonstrate to the agency that resident needs are being met, or that resident needs can be met without increased staffing, the agency may modify staffing requirements for the facility and the facility will no longer be required to maintain a plan with the agency. (e) Facilities that are co-located with a nursing home may use shared staffing provided that staff hours are only counted once for the purpose of meeting either assisted living facility or nursing home minimum staffing ratios. (f) Facilities holding a limited mental health,	A 079		

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A 079	Continued From page 6 extended congregate care, or limited nursing services license must also comply with the staffing requirements of rules 59A-36.020, 59A-36.021 or 59A-36.022, F.A.C., respectively. This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure that a staff member who is at least , and at least one staff member who has access to facility and resident records, was present in the facility during the absence of the administrator or manager. The findings include: On at 9:46 AM, this surveyor entered the facility and greeted by Staff C, MedTech. This surveyor introduced himself and asked if the Administrator was available, to which she stated no. A request was made for her to telephone the Administrator, which she did on the facility's telephone and got no answer. She then called her from her personal cellular (cell) phone and did not get an answer. In an interview with Staff C on at 9:49 AM, this surveyor asked if she was the person in charge when the Administrator wasn't at the facility. She said no, but that she does the best she can (to cover). This surveyor asked if she had access to the resident and staff files and she stated she did not. She stated they are kept in the locked Administrator's office, and that I would have to speak with the boss. This surveyor asked whom else we could speak with, and she stated (the Facility Manager) was next in line to the Administrator. On at 9:53 AM Staff C telephoned the	A 079		

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A 079	Continued From page 7 Facility Manager and informed her that I was there. She gave the telephone to this surveyor, who informed her of the purpose of the visit. To assist Staff C this surveyor asked if she was aware of where specific documents and files were. She stated she was not sure and would come to the facility, from a sister facility. On . . . . . at 10:16 AM, an observation was made of the Facility Manager, Staff E in the facility, accompanied by the Resident Care Coordinator, Staff F. In an interview with the Facility Manager on . . . . . at 10:52 AM, she stated she was calling the facility's Administrator, who was with her (parent) in (another state) because of medical reasons. She further stated that she is the manager at a sister facility but covers the facility when needed, and is in charge when the Administrator is not there. No designation of authority documentation was provided. On at 10:58 AM, this surveyor received a telephone call from the Administrator, Staff A. She stated she had to go to (another state) to take care of (a parent) for a while. She did not provide any information relative to documentation regarding delegation of authority in her absence. During the tour of the facility this surveyor did not see a delegation of authority document posted, nor was one provided during the survey. Class	A 079		