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 |
|---|---|---|---|
| | AL11969760 | A. BUILDING: _____ B. WING _____ | 02/08/2024 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| CANTERFIELD OF FORT MYERS, LLC | 18301 TRIFECTA LN FORT MYERS, FL 33967 |

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| A 000 | Initial Comments<br><br>An unannounced relicensure, limited nursing services, emergency power plan, health facility reporting system, generator, visitation form, and complaint survey for #2023004816 and #2023013928 was conducted on through at Canterfield of Fort Myers, an assisted living facility in Fort Myers, Florida.<br><br>Complaint #2023008868 was substantiated without citation.<br>Complaint #2023009899 was substantiated without citation.<br><br>The following is a description of the deficiencies. | A 000 | | |
| A 036 SS=D | 59A-36.007(10) CONTROL PROCEDURES<br><br>(10) CONTROL PROCEDURES. Facilities must provide services in a manner that reduces the risk of transmission of<br>(a) The facility must implement a hygiene program before and after the provision of personal services to residents whenever there is an expectation of possible exposure to materials or , hygiene may include the use of -based rubs, , handwash, or handwashing with soap and water.<br>(b) Standard precautions must be used when there is an , exposure to transmissible agents in , , , , nonintact skin, and mucuous during the provision of personal services. Standard precautions include: hygiene, and dependent upon the exposure, use of gloves, gown, mask, , protection, or a shield.<br>(c) The facility must clean and reusable | A 036 | | |

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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| A 036 | Continued From page 1<br><br>medical equipment and communal assistive devices that have been designed for use by multiple residents before and after each use according to the manufacturer's recommendations.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on observation, record review and interview, the facility failed to ensure staff provide services in a manner that reduces the risk of transmission of . . . . . during lunch service observation.<br><br>The findings included:<br><br>Facility policy and procedure titled Control . . Hygiene approved . . . . indicated:<br>1. Caregivers must wash their . . between residents as well as change their gloves.<br>2. Never reuse gloves.<br>4. Wash your . . . . with soap and water<br>d. After contact with a resident.<br>f. After contact with objects and surfaces in the Resident's environment.<br><br>During a dining service observation on from 12:00 p.m. - 12:30 p.m., Staff A Resident Care Aide was observed to don a pair of gloves. She was then observed serving drinks, handing out soup dishes, touching residents backs and arms, touching resident chair arm rails, touching furniture in dining room, touching wheelchair handles, stirring Resident #15's soup, clearing dirty dishes off resident tables and sitting down and feeding a soup to Resident #16. Staff A never changed her gloves or washed her . The Director of community relations was present in dining room and observed same.<br><br>At 12:20 p.m., the Director of Community | A 036 | | |

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| A 036 | Continued From page 2<br><br>Relations said she was not going to just watch it go on, and approached Staff A, at which time Staff A got up walked to kitchen area, removed gloves and washed her .<br><br>On at 1:16 p.m., Staff A said she had received training in control and knew she was supposed to wash and change gloves. She said she just forgot.<br><br>On at 1:20 p.m., the Administrator said the scenario would be an control issue. She said staff were trained on dining/nutrition handling yearly. She said she has been considering having dedicated server staff and taking the direct care workers off dining service.<br><br>Class III | A 036 | | |
| A 081 SS=D | 429.52(1 & 7) FS; 59A-36.011( ) FAC Training - Staff In-Service<br><br>429.52<br>(1)(a) 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>(b) Each assisted living facility employee must complete the training required under s. 430.5025. However, an employee of an assisted living | A 081 | | |

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| A 081 | Continued From page 3<br><br>facility licensed as a limited mental health facility under s. 429.075 is exempt from the training requirements under s. 430.5025(4)(d).<br>(c) If an assisted living facility employee completes the 1-hour training required under s. 430.5025 before interacting with residents, such training may count toward the 2 hours of preservice orientation required under paragraph (a).<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 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, | A 081 | | |

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| A 081 | Continued From page 4<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.<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 [illegible], neglect, and [illegible]. The facility must use its [illegible] prevention policies and procedures when offering this training.<br>(d) Staff who provide direct care to residents, | A 081 | | |

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| A 081 | Continued From page 5<br><br>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.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on record review and interview, the facility failed to ensure facility employees complete required in-service training within 30 days of employment for 3 (Staff A, B and C) of 3 staff files reviewed.<br><br>The findings included:<br><br>Staff A's employee file revealed a hire date of | A 081 | | |

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| A 081 | Continued From page 6<br><br>. . . . . as a Resident Care Aide (RCA). Staff A's employee file contained no documentation of having completed: 3-hour training in Activities of Daily Living and Behavioral Needs; 1-hour training in Reporting Major Incidents, Adverse events, Facility Emergency Procedures, and Incident Report training; 1-hour training in Resident Rights and Recognizing/Reporting . . . . & Neglect; and 1-hour training in Nutrition and Safe Food Handling.<br><br>Staff B's employee file revealed a hire date of . . . . . as a RCA. Staff B's employee file contained no documentation of having completed 1-hour training in Nutrition and Safe Food Handling.<br><br>Staff C's employee file revealed a hire date of . . . . . as a RCA. Staff C's employee file contained no documentation of having completed 1-hour training in Nutrition and Safe Food Handling.<br><br>On at 9:10 a.m., the Administrator said she was aware the trainings were required to be completed within 30 days of the date of hire. She said the Business Office Manager had just started while the facility was going through transition. She said the staff had been given leeway to complete the trainings on their own and it had slipped through the cracks.<br><br>Class III | A 081 | | |
| A 090 SS=D | 59A-36.011(11) FAC Training - . . . .<br><br>(11)<br>TRAINING. | A 090 | | |

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| A 090 | Continued From page 7<br><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 .<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 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 record review and interview the facility failed to ensure direct care staff receive at least one hour of training in the facility's policy and procedures regarding . ( ) within 30 days of employment for 1 (Staff A) of 3 staff filed reviewed.<br><br>The findings included:<br><br>On . . . at 9:50 a.m., Staff A (Resident Care Aide) was asked if she knew what a was and how to identify if a resident was a . Staff A seemed by the question and was unable to say what a . was or if she had received any training in this.<br><br>Staff A's employee file revealed a hire date of . . Staff A's employee file contained no documentation of having completed 1-hour training in .<br><br>On at 9:10 a.m., the Administrator said she was aware the trainings were to be completed within 30 days of the date of hire. She said the staff had been given leeway to complete the | A 090 | | |

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| A 090 | Continued From page 8<br>trainings on their own and it had slipped through the cracks.<br><br>Class III | A 090 | | |