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
	AL11969345	A. BUILDING: _____ B. WING _____	10/15/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WHISPERING PINES ASSISTED LIVING FACILITY LLC	1030 JOJO ROAD PENSACOLA, FL 32514

(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 biennial was conducted on - at Whispering Pines Assisted Living Facility in Pensacola, Florida. A review of the facility's limited mental health license and a generator assessment were also performed during the survey. At the time of the survey, deficient practice was identified.	A 000		
A 078 SS=D	59A-36.010(2) FAC Staffing Standards - Staff (2) STAFF. (a) Within 30 days after beginning employment, newly hired staff must submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable , The examination performed by the health care provider must have been conducted no earlier than 6 months before submission of the statement. Newly hired staff does not include an employee transferring without a break in service from one facility to another when the facility is under the same management or ownership. 1. Evidence of a negative examination must be documented on an annual basis. Documentation provided by the Florida Department of Health or a licensed health care provider certifying that there is a shortage of testing materials satisfies the annual examination requirement. An individual with a positive test must submit a health care provider's statement that the individual does not constitute a risk of 2. If any staff member has, or is suspected of having, a communicable , such individual must be immediately removed from duties until a written statement is submitted from a health care provider indicating that the individual does not	A 078		

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A 078	Continued From page 1 constitute a risk of transmitting a communicable . (b) Staff must be qualified to perform their assigned duties consistent with their level of education, training, preparation, and experience. Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff must exercise their responsibilities, consistent with their qualifications, to observe residents, to document observations on the appropriate resident's record, and to report the observations to the resident's health care provider in accordance with this rule chapter. (c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C. (d) An assisted living facility ␣ to provide services to residents must ensure that individuals providing services are qualified to perform their assigned duties in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor must specifically describe the services the staffing agency or contractor will provide to residents. (e) For facilities with a licensed capacity of 17 or more residents, the facility must: 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and, 2. Maintain time sheets for all staff. (f) Level 2 background screening must be conducted for staff, including staff by the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S. This Statute or Rule is not met as evidenced by: Based on employee record reviews and interviews, the facility failed to ensure staff had evidence of annual testing for 3 of 3 caregivers sampled (Employees B, C, D) and	A 078		

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A 078	Continued From page 2 failed to have the required written statement from a healthcare provider documenting that a newly hired caregiver (Employee D) did not have any signs or symptoms of communicable . The findings included: Reviews conducted on of the employee files for Employees B, C, and D, all working as Medication Technicians, did not contain evidence of testing within the past year. Employee B has been employed since , Employee C has been employed since , and Employee D has been employed since . In addition, Employee D's file did not contain evidence of a statement from a healthcare provider documenting that she did not have any signs or symptoms of communicable . During an interview on at 10:08 am, Employee B, who is also the facility manager, confirmed there was no documentation present for these issues. Class III	A 078		
A 083 SS=D	59A-36.011(5) FAC Training - First Aid and (5) FIRST AID AND ( ). 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 that the staff member possess current certification that requires the student to demonstrate, in person, that he or she is able to perform and which is issued by an	A 083		

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A 083	Continued From page 3 instructor or training provider that is approved to provide training by the American Red Cross, the American Association, the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education satisfies this requirement. (b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, Part III, F.S., shall be considered as having met the training requirements for both First Aid and C.P.R. This Statute or Rule is not met as evidenced by: Based on observations, interviews, and employee record reviews, the facility failed to ensure a staff member with a currently valid first aid and ( ) training card was on duty at all times. The findings include: The staff observed on duty on and during the 7:00 am - 3:00 pm shift were Caregivers B and C and, for the 3:00 pm - 11:00 pm shift, were Caregivers B and D. Reviews conducted on of employee files for Caregivers B, C, and D confirmed that they did not contain evidence of a currently valid first aid and training card. In an interview with Caregiver B, who is also the manager on at approximately 12:00 pm, Caregiver B said she was unable to find evidence of first aid and training that is current for herself or Caregivers C and D.	A 083		

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A 083	Continued From page 4 Class III	A 083		
A 085 SS=D	59A-36.011(7) FAC Training - Nutrition & Food Service (7) NUTRITION AND FOOD SERVICE. The administrator or person designated by the administrator as responsible for the facility's food service and the day-to-day supervision of food service staff must obtain, annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility. This requirement does not apply to administrators and designees who are exempt from training requirements under paragraph 59A-36.012(1)(b). A certified food manager, licensed dietician, registered dietary technician or health department sanitarian is qualified to train assisted living facility staff in nutrition and food service. This Statute or Rule is not met as evidenced by: Based on interview and employee record review, the facility failed to meet the requirement of having the staff member responsible for day-to-day food and nutrition services complete 2 hours of continuing education in topics pertinent to nutrition and food service in an assisted living facility annually. The findings include: An employee record review conducted on for Caregiver B, who is also the manager, contained a food and nutrition service training certificate dated . During an interview with Caregiver B on at 11:00am, she stated that she is	A 085		

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A 085	Continued From page 5 responsible for the day-to-day operations of the food service. In a follow up interview, Caregiver B provided a certified food protection manager certificate issued on and said she believed this was good for 5 years. Caregiver B said she does not have additional formal training documented since the , date and was not aware of the specific requirements for 2 hours of training annually. Class III	A 085		
AL243 SS=D	429.075(1) FS; 59A-36.011(9) FAC LMH - Training 429.075 (1) To obtain a limited mental health license, a facility must hold a standard license as an assisted living facility, must not have any current uncorrected violations, and must ensure that, within 6 months after receiving a limited mental health license, the facility administrator and the staff of the facility who are in direct contact with mental health residents must complete training of no less than 6 hours related to their duties. This designation may be made at the time of initial licensure or relicensure or upon request in writing by a licensee under this part and part II of chapter 408. Notification of approval or denial of such request shall be made in accordance with this part, part II of chapter 408, and applicable rules. This training must be provided by or approved by the Department of Children and Families. 59A-36.011 (9) LIMITED MENTAL HEALTH TRAINING. (a) Pursuant to section 429.075, F.S., the administrator, managers and staff, who have direct contact with mental health residents in a	AL243		

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AL243	Continued From page 6 licensed limited mental health facility, must receive the following training: 1. A minimum of 6 hours of specialized training in working with individuals with mental health diagnoses. a. The training must be provided or approved by the Department of Children and Families and must be taken within 6 months of the facility's receiving a limited mental health license or within 6 months of employment in a limited mental health facility. b. Training received under this subparagraph may count once for 6 of the 12 hours of continuing education required for administrators and managers pursuant to section 429.52(5), F.S., and subsection (1) of this rule. 2. A minimum of 3 hours of continuing education, which may be provided by the ALF administrator, online, or through distance learning, biennially thereafter in subjects dealing with one or more of the following topics: a. Mental health diagnoses; and, b. Mental health treatment such as: (I) Mental health needs, services, behaviors and appropriate interventions; (II) Resident progress in achieving treatment goals; (III) How to recognize changes in the resident's status or condition that may affect other services received or may require intervention; and, ( ) Crisis services and the procedures. 3. For administrators and managers, the continuing education requirement under this subsection will satisfy 3 of the 12 hours of continuing education required biennially pursuant to section 429.52(5), F.S., and subsection (1) of this rule. 4. Administrators, managers and direct contact	AL243		

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AL243	Continued From page 7 staff affected by the continuing education requirement under this subsection shall have up to 6 months after the effective date of this rule to meet the training requirement. (b) Administrators, managers and staff do not have to repeat the initial training should they change employers provided they present a copy of their training certificate to the current employer for retention in the facility's personnel files. They must also ensure that copies of the continuing education training certificates, pursuant to subparagraph (a)2. of this subsection, are retained in their personnel files. This Statute or Rule is not met as evidenced by: Based on employee record reviews and interviews, the facility failed to ensure staff had evidence of 3 hours of continuing education completed biennially after the initial 6-hour training requirement for specialized training in working with individuals with a mental health diagnosis (Caregivers B and C). The findings include: Reviews conducted on of employee files for Caregiver B (hire date) and Caregiver C (hire date) did not contain evidence of biennial completion of 3 hours of continuing education in one or more of the following topics: a. Mental health diagnoses; and, b. Mental health treatment such as: (I) Mental health needs, services, behaviors and appropriate interventions; (II) Resident progress in achieving treatment goals; (III) How to recognize changes in the resident's status or condition that may affect other services received or may require intervention; and, ( ) Crisis services and the procedures. The most	AL243		

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AL243	Continued From page 8 recent related training for Caregiver B was dated and for Caregiver C was dated . In an interview with Caregiver B, who is also the manager, on at 10:41 am, she was asked if any of the recent trainings that staff received covered this requirement. Caregiver B said she did not know about the 3-hour biennial requirement and was unable to find any more recent training documentation. Class III	AL243		

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A 078	Continued From page 4 written statement is submitted from a health care provider indicating that the individual does not constitute a risk of transmitting a communicable (b) Staff must be qualified to perform their assigned duties consistent with their level of education, training, preparation, and experience. Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff must exercise their responsibilities, consistent with their qualifications, to observe residents, to document observations on the appropriate resident's record, and to report the observations to the resident's health care provider in accordance with this rule chapter. (c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C. (d) An assisted living facility to provide services to residents must ensure that individuals providing services are qualified to perform their assigned duties in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor must specifically describe the services the staffing agency or contractor will provide to residents. (e) For facilities with a licensed capacity of 17 or more residents, the facility must: 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and, 2. Maintain time sheets for all staff. (f) Level 2 background screening must be conducted for staff, including staff by the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S. This Statute or Rule is not met as evidenced by: Based on employee record reviews and interviews, the facility failed to ensure staff had	A 078		

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A 078	Continued From page 5 evidence of annual testing for 3 of 3 caregivers sampled (Employees B, C, D) and failed to have the required written statement from a healthcare provider documenting that a newly hired caregiver (Employee D) did not have any signs or symptoms of communicable . The findings included: Reviews conducted on of the employee files for Employees B, C, and D, all working as Medication Technicians, did not contain evidence of testing within the past year. Employee B has been employed since , Employee C has been employed since , and Employee D has been employed since . In addition, Employee D's file did not contain evidence of a statement from a healthcare provider documenting that she did not have any signs or symptoms of communicable . During an interview on at 10:08 am, Employee B, who is also the facility manager, confirmed there was no documentation present for these issues. Class III	A 078		
A 083 SS=D	59A-36.011(5) FAC Training - First Aid and (5) FIRST AID AND ( ). 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 that the staff member possess current certification that requires the student	A 083		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11969345	A. BUILDING: _____ B. WING _____	10/15/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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A 083	Continued From page 6 to demonstrate, in person, that he or she is able to perform and which is issued by an instructor or training provider that is approved to provide training by the American Red Cross, the American Association, the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education satisfies this requirement. (b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, Part III, F.S., shall be considered as having met the training requirements for both First Aid and C.P.R. This Statute or Rule is not met as evidenced by: Based on observations, interviews, and employee record reviews, the facility failed to ensure a staff member with a currently valid first aid and ( ) training card was on duty at all times. The findings include: The staff observed on duty on and during the 7:00 am - 3:00 pm shift were Caregivers B and C and, for the 3:00 pm - 11:00 pm shift, were Caregivers B and D. Reviews conducted on of employee files for Caregivers B, C, and D confirmed that they did not contain evidence of a currently valid first aid and training card. In an interview with Caregiver B, who is also the manager on at approximately 12:00 pm, Caregiver B said she was unable to find evidence of first aid and training that is	A 083		

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A 083	Continued From page 7 current for herself or Caregivers C and D. Class III	A 083		
A 085 SS=D	59A-36.011(7) FAC Training - Nutrition & Food Service (7) NUTRITION AND FOOD SERVICE. The administrator or person designated by the administrator as responsible for the facility's food service and the day-to-day supervision of food service staff must obtain, annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility. This requirement does not apply to administrators and designees who are exempt from training requirements under paragraph 59A-36.012(1)(b). A certified food manager, licensed dietician, registered dietary technician or health department sanitarian is qualified to train assisted living facility staff in nutrition and food service. This Statute or Rule is not met as evidenced by: Based on interview and employee record review, the facility failed to meet the requirement of having the staff member responsible for day-to-day food and nutrition services complete 2 hours of continuing education in topics pertinent to nutrition and food service in an assisted living facility annually. The findings include: An employee record review conducted on for Caregiver B, who is also the manager, contained a food and nutrition service training certificate dated .	A 085		

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
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A 085	Continued From page 8 During an interview with Caregiver B on at 11:00am, she stated that she is responsible for the day-to-day operations of the food service. In a follow up interview, Caregiver B provided a certified food protection manager certificate issued on and said she believed this was good for 5 years. Caregiver B said she does not have additional formal training documented since the date and was not aware of the specific requirements for 2 hours of training annually. Class III	A 085		