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
	AL11964870	A. BUILDING: _____ B. WING _____	10/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PACIFICA SENIOR LIVING FORT MYERS	9461 HEALTHPARK CIRCLE FORT MYERS, FL 33908

(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 Post Event Assessment and Emergency Power Plan monitoring visit was conducted on through at Pacifica Senior Living Fort Myers, an assisted living facility in Fort Myers, Florida. The following is a description of the deficiency found during the survey. .	A 000		
A 200 SS=E	59A-36.025 FAC Emergency Environmental Control 59A-36.025 Emergency Environmental Control for Assisted Living Facilities. (1) DETAILED EMERGENCY ENVIRONMENTAL CONTROL PLAN. Each assisted living facility shall prepare a detailed plan ("plan") to serve as a supplement to its Comprehensive Emergency Management Plan, to address emergency environmental control in the event of the loss of primary electrical power in that assisted living facility which includes the following information: (a) The acquisition of a sufficient alternate power source such as a generator(s), maintained at the assisted living facility, to ensure that current licensees of assisted living facilities will be equipped to ensure air temperatures will be maintained at or below 81 degrees Fahrenheit for a minimum of ninety-six (96) hours in the event of the loss of primary electrical power. 1. The required temperature must be maintained in an area or areas, determined by the assisted living facility, of sufficient size to maintain residents safely at all times and that is appropriate for resident care needs and life safety requirements. For planning purposes, no less than twenty (20) net square per resident	A 200		

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A 200	Continued From page 1	A 200		

must be provided. The assisted living facility may use eighty percent (80%) of its licensed bed capacity as the number of residents to be used in the to determine the required square footage. This may include areas that are less than the entire assisted living facility if the assisted living facility's comprehensive emergency management plan includes allowing a resident to congregate when he or she desires in portions of the building where temperatures will be maintained and includes procedures for monitoring residents for signs of heat related injury as required by this rule. This rule does not prohibit a facility from acting as a receiving provider for evacuees when the conditions stated in Section 408.821, F.S. and subsection 59A-36.019(5), F.A.C., are met. The plan shall include information regarding the area(s) within the assisted living facility where the required temperature will be maintained.
2. The alternate power source and fuel supply shall be located in an area(s) in accordance with local zoning and the Florida Building Code.
3. Each assisted living facility is unique in size; the types of care provided; the physical and mental capabilities and needs of residents; the type, frequency, and amount of services and care offered; and staffing characteristics. Accordingly, this rule does not limit the types of systems or equipment that may be used to achieve temperatures at or below 81 degrees Fahrenheit for a minimum of ninety-six (96) hours in the event of the loss of primary electrical power. The plan shall include information regarding the systems and equipment that will be used by the assisted living facility and the fuel required to operate the systems and equipment.
a. An assisted living facility in an evacuation zone pursuant to Chapter 252, F, S. must maintain an

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A 200	Continued From page 2 alternative power source and fuel as required by this subsection at all times when the assisted living facility is occupied but is permitted to utilize a mobile generator(s) to enable portability if evacuation is necessary. b. Assisted living facilities located on a single campus with other facilities under common ownership, may share fuel, alternative power resources, and resident space available on the campus if such resources are sufficient to support the requirements of each facility's residents, as specified in this rule. Details regarding how resources will be shared and any necessary movement of residents must be clearly described in the emergency power plan. c. A multistory facility, whose comprehensive emergency management plan is to move residents to a higher floor during a flood or surge event, must place its alternative power source and all necessary additional equipment so it can safely operate in a location protected from flooding or storm surge damage. (b) The acquisition of sufficient fuel, and safe maintenance of that fuel at the facility, to ensure that in the event of the loss of primary electrical power there is sufficient fuel available for the alternate power source to maintain temperatures at or below 81 degrees Fahrenheit for a minimum of ninety-six (96) hours after the loss of primary electrical power during a declared state of emergency. The plan must include information regarding fuel source and fuel storage. 1. Facilities must store minimum amounts of fuel onsite as follows: a. A facility with a licensed capacity of 16 beds or less must store 48 hours of fuel onsite. b. A facility with a licensed capacity of 17 or more beds must store 72 hours of fuel onsite.	A 200		

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A 200	Continued From page 3 2. An assisted living facility located in an area in a declared state of emergency area pursuant to Section 252.36, F.S. that may impact primary power delivery must secure ninety-six (96) hours of fuel. The assisted living facility may utilize portable fuel storage containers for the remaining fuel necessary for ninety-six (96) hours during the period of a declared state of emergency. 3. Piped natural gas is an allowable fuel source and meets the onsite fuel supply requirements under this rule. 4. If local ordinances or other regulations limit the amount of onsite fuel storage for the assisted living facility's location, then the assisted living facility must develop a plan that includes maximum onsite fuel storage allowable by the ordinance or regulation and a reliable method to obtain the maximum additional fuel at least 24 hours prior to depletion of onsite fuel. (c) The acquisition of services necessary to maintain, and test the equipment and its functions to ensure the safe and sufficient operation of the alternate power source maintained at the assisted living facility. (d) The acquisition and maintenance of a monoxide alarm. (2) SUBMISSION OF THE PLAN. (a) Each new assisted living facility shall submit the plan required under this rule prior to obtaining a license. (b) Each existing assisted living facility that undergoes any additions, modifications, alterations, refurbishment, renovations or reconstruction that require modification of its systems or equipment affecting the facility's compliance with this rule shall amend its plan and submit it to the county emergency management agency for review and approval. (3) APPROVED PLANS.	A 200		

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A 200	Continued From page 4 (a) Each assisted living facility must maintain a copy of its approved plan in a manner that makes the plan readily available at the licensee's physical address for review by a legally authorized entity. If the plan is maintained in an electronic format, assisted living facility staff must be readily available to access and produce the plan. For purposes of this section, "readily available" means the ability to immediately produce the plan, either in electronic or paper format, upon request. (b) Within 30 days of the approval of the plan from the county emergency management agency, the assisted living facility shall submit in writing proof of the approval to the Agency for Health Care Administration to assistedliving@ahca.myflorida.com. (c) The assisted living facility shall submit a consumer-friendly summary of the emergency power plan to the Agency. The Agency shall post the summary and notice of the approval and implementation of the assisted living facility emergency power plans on its website within ten (10) business days of the plan's approval by the county emergency management agency and update within ten (10) business days of implementation. (4) IMPLEMENTATION OF THE PLAN. (a) Each assisted living facility licensed prior to the effective date of this rule shall, no later than . , have implemented the plan required under this rule. (b) Each new assisted living facility shall implement the plan required under this rule prior to obtaining a license. (c) Existing assisted living facilities that undergo any additions, modifications, alterations, refurbishment, renovations or reconstruction that require modification of the systems or equipment	A 200		

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A 200	Continued From page 5 affecting the assisted living facility's compliance with this rule shall implement its amended plan concurrent with any such additions, modifications, alterations, refurbishment, renovations or reconstruction. (5) POLICIES AND PROCEDURES. (a) Each assisted living facility shall develop and implement written policies and procedures to ensure that the assisted living facility can effectively and immediately activate, operate and maintain the alternate power source and any fuel required for the operation of the alternate power source. The procedures shall ensure that residents do not experience complications from fluctuations in air temperatures inside the facility. Procedures must address the care of residents occupying the facility during a declared state of emergency, specifically, a description of the methods to be used to mitigate the potential for heat related injury including: 1. The use of cooling devices and equipment; 2. The use of refrigeration and freezers to produce ice and appropriate temperatures for the maintenance of medicines requiring refrigeration; 3. Wellness checks by assisted living facility staff to monitor for signs of , and heat injury; and 4. A provision for obtaining medical intervention from emergency services for residents whose life safety is in jeopardy. (b) Each assisted living facility shall maintain the written policies and procedures in a manner that makes them readily available at the licensee's physical address for review by a legally authorized entity. If the policies and procedures are maintained in an electronic format, assisted living facility staff must be readily available to access the policies and procedures and produce the requested information. For purposes of this	A 200		

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section, "readily available" means the ability to immediately produce the policies and procedures, either in electronic or paper format, upon request.
(c) The written policies and procedures must be readily available for inspection by each resident; each resident's legal representative, designee, surrogate, guardian, attorney in fact, or case manager; each resident's estate; and such additional parties as authorized in writing or by law.
(6) REVOCATION OF LICENSE, FINES OR SANCTIONS. For a violation of any part of this rule, the Agency for Health Care Administration may seek any remedy authorized by Chapter 429, Part I, or Chapter 408, Part II, F.S., including, but not limited to, license revocation, license suspension, and the imposition of administrative fines.
(7) COMPREHENSIVE EMERGENCY MANAGEMENT PLAN.
(a) Assisted living facilities whose comprehensive emergency management plan is to evacuate must comply with this rule.
(b) Each facility whose plan has been approved shall submit the plan as an addendum with any future submissions for approval of its comprehensive emergency management plan.
(8) NOTIFICATION.
(a) Within five (5) business days, each assisted living facility must notify in writing, unless permission for electronic communication has been granted, each resident and the resident's legal representative:
1. Upon the initial submission of the plan to the county emergency management agency that the plan has been submitted for review and approval;
2. Upon final implementation of the plan by the assisted living facility.
3. Annual submissions and approvals of the plan

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A 200	Continued From page 7 do not require notification to residents or their legal representatives unless a significant modification as defined in Rule 59A-36.019, F.A.C., has been made to the plan. (b) Each assisted living facility must maintain a copy of each notification set forth in paragraph (a) above in a manner that makes each notification readily available at the licensee's physical address for review by a legally authorized entity. If the notifications are maintained in an electronic format, facility staff must be readily available to access and produce the notifications. For purposes of this section, "readily available" means the ability to immediately produce the notifications, either in electronic or paper format, upon request. This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure adequate staff were trained to ensure generator power would be instituted immediately during a power outage; failed to ensure -up staff was registered for the Health Facility Reporting System (HFRS) by having only 1 (Executive Director) of 7 administrative staff with a password to the system; failed to ensure a written generator operation procedure was available to staff in the event of a power failure; failed to ensure adequate fuel was on to operate all generators for 96 hours once a State of Emergency had been declared; and failed to ensure the Emergency Power Plan had details on fuel usage rates and amount needed on to ensure operational generators for 3 of 3 portable generators. The findings included: On at 11:00 a.m., the Governor declared	A 200		

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A 200	Continued From page 8 a State of Emergency for 41 counties (including Lee County) in Florida ahead of Tropical Cyclone Nine. On at approximately 3:35 p.m., the Resident Services Director ( ) and Business Office Manager (BOM) said the Executive Director (ED) was on leave and unable to be present in the facility. Both the and the BOM said they had only been employed at the facility about 2 months. They were both unaware of the HFRS and the need to be able to enter information during an emergency in the absence of the ED. On at approximately 3:40 p.m., the Resident Services Director ( ), Business Office Manager (BOM) said Maintenance Director (MD) said they were not aware of a written procedure to start the generators in the event they failed to start automatically and the procedure to start the 3 portable generators. The MD said he had only been hired at the facility a little over 2 weeks prior. The MD verified the Emergency Preparedness training he provided did not include who to operate the generators or supplies needed for the portable generator set up and operation, when presenting the training at staff orientation. On at approximately 4:00 p.m. observation of the Housekeeping room located behind the Kitchen in the Administration building revealed a storage room with 1 generator, and 6 5-gallon fuel containers of which 5 were full equaling 25 gallons of fuel for 3 generators for 96 hours. The 6th container had been used per the Maintenance Director. The room contained a couple of buckets with power and plugs.	A 200		

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A 200	Continued From page 9 On at approximately 4:05 p.m. observation of the fixed generator located behind the kitchen revealed a Generator with no power designation on any visible label. The Maintenance Director was not able to locate any generator specifications on the machine. Observation of the fuel gauge showed 45% out of 90% full. On at approximately 4:10 p.m., observation of the fixed generator located between Cottages 3 and 4 revealed a Generac 200 KW generator. The fuel gauge showed full. The underground propane tank gauge showed 70% of 70% full. On at approximately 4:20 p.m., observation of the enclosed courtyard between Cottages 1 and 2 revealed 2 generators, disconnected and without extension , plugs or fuel positioned in case of need. On at 4:22 p.m., Caregiver Staff A said she was not sure how to start the generator, but would pull the cord, or turn the key and it starts. She said she would open the button and put fuel in the machine. She verified she had not been trained in how to hook up the generator, what equipment was needed to hook up the generator, and what equipment to power once the generator was hooked up. She said she would call maintenance. On at 4:30 p.m., Caregiver Staff B said she would try to contact a manager or maintenance for instructions if there was a power outage. She also said she would wait for the power company to fix the power outage. She verified she had not been trained in how to hook up the generator, what equipment was needed to	A 200		

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A 200	Continued From page 10 hook up the generator, and what equipment to power once the generator was hooked up. She said she would call maintenance. On at approximately 4:40 p.m., observation of Cottage 3 revealed a closed building under repair. In one of the rooms additional extension , power , emergency lamps, and other emergency supplies were observed. On at approximately 5:25 p.m., a tour of Cottage 5 revealed a small leak in the roof. The Maintenance Director verified the roof had leaked. He said the roofing company on site was to give them an estimate for repair. On , a Power Outage Protocol pages 121 to 124 were provided via email. The Protocol did not include how to start the fixed generators if the power went off and the generators did not start automatically. The Protocol did not include the procedure to set up and operate the portable generators needed for Cottages 1, 2 and 5. The protocol did not include the supplies needed or how the generators would be used to power what equipment in the event of a power outage. Class III	A 200		