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
	AL11965026	A. BUILDING: _____ B. WING _____	01/14/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE FORT MYERS CYPRESS LAKE	7460 LAKE BREEZE DRIVE FORT MYERS, FL 33919

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A 000	Initial Comments An unannounced relicensure, extended congregate service, emergency power plan monitoring, visitation form, and complaint survey for #202401602 was conducted on through at Brookdale Fort Myers Cypress Lake, an assisted living facility in Fort Myers, Florida. Complaint # 202401602 was substantiated without citation. The following is description of the deficiencies: .	A 000		
A 081 SS=D	429.52(1 & 7) FS; 59A-36.011( ) FAC Training - Staff In-Service 429.52 (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. (b) Each assisted living facility employee must complete the training required under s. 430.5025. However, an employee of an assisted living facility licensed as a limited mental health facility under s. 429.075 is exempt from the training requirements under s. 430.5025(4)(d). (c) If an assisted living facility employee completes the 1-hour training required under s.	A 081		

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A 081	Continued From page 1 430.5025 before interacting with residents, such training may count toward the 2 hours of preservice orientation required under paragraph (a). (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 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	A 081		

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A 081	Continued From page 2 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. 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:	A 081		

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A 081	Continued From page 3 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. This Statute or Rule is not met as evidenced by: Based on record review, and staff interview, the facility failed to ensure that 1 (Health and Wellness Director) of 3 staff records reviewed completed 1 hour in service training within 30 days of hire that covered residents rights in an assisted living facility, recognizing and reporting residents ,neglect and , . The facility failed to provide evidence that the facility's staff were provided a copy of the facility's elopement policies and procedures for 2 (Health and Wellness Director and staff D) of 3 staff records reviewed . The facility failed to provide evidence of competency in the implementation of the elopement response policies and procedures	A 081		

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A 081	Continued From page 4 for 2 (Health and Wellness Director and staff D) of 3 staff records reviewed. The findings included: 1. Record review showed the facility's Health and Wellness Director (HWD) was hired on . Further review showed no evidence of completion of 1 hour in service training within 30 days of employment that covered residents rights in an assisted living facility, recognizing and reporting residents , neglect and , . In addition there was no evidence the HWD was provided a copy of the facility's elopement policies and procedures . Furthermore, there was no evidence of competency in the implementation of the elopement response policies and procedures for the facility's HWD. 2. Record review showed staff D was hired on as a medication technician. Record review found no evidence that staff D was provided a copy of the facility's elopement policies and procedures. Furthermore there was no evidence of competency in the implementation of the elopement response policies and procedures for staff D. During an interview with the facility's administrator on at 4:00 p.m. he confirmed the facility's HWD did not complete the required 1 hour in service training within 30 days of employment, that covered residents rights in an assisted living facility, recognizing and reporting residents ,neglect and , . The Administrator acknowledged there was no evidence of documentation the HWD and staff D received a copy of the facility's elopement policies and procedures. Furthermore, the Administrator	A 081		

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A 081	Continued From page 5 acknowledged that there was no evidence of competencies in the implementation of the elopement response policies and procedures for staff D and the HWD. Class III .	A 081		

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CZ814	435.12(2)(b-d), FS Background Screening Clearinghouse 435.12 Care Provider Background Screening Clearinghouse.- (2)(b) Until such time as the , are enrolled in the national retained print notification program at the Federal Bureau of Investigation: 1. A person with a break in service of more than 90 days from a position that requires screening by a specified agency must submit to a national screening if the person returns to a position that requires screening by a specified agency. 2. Effective , or a later date as determined by the Agency for Health Care Administration, for the participation of qualified entities in the clearinghouse under s. 435.12, a person with a break in service of more than 90 days from a position for which screening is conducted by a qualified entity participating in the clearinghouse must submit to a national screening if the person returns to a position for which screening is conducted by a qualified entity. (c) An employer of persons subject to screening or a qualified entity participating in the clearinghouse must register with the clearinghouse and maintain the employment or affiliation status of all persons included in the clearinghouse. 1. Before , initial status and any changes in status must be reported within 10 business days after a person receives his or her initial status or after a change in the person ' s status has been made. 2. Effective , initial status and any changes in status must be reported within 5 business days after a person receives his or her initial status or after a change in the person ' s status has been made.	CZ814		

AHCA Form 3020-0001

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

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CZ814	Continued From page 1 (d) An employer or a qualified entity participating in the clearinghouse must register with and initiate all criminal history checks through the clearinghouse before referring an employee or potential employee or a person with a current or potential affiliation with a qualified entity for electronic ˘ , submission to the Department of Law Enforcement. The registration must include the person ' s full first name, middle initial, and last name; social security number; date of birth; mailing address; ; and race. Individuals, persons, applicants, and controlling interests that cannot legally obtain a social security number must provide an individual taxpayer identification number. This Statute or Rule is not met as evidenced by: Based on record review, and staff interview, the facility failed to ensure 3 (staff E, Administrator, and Extended Congregate Care Nurse) of 4 staff records reviewed, had Level 2 Background screening employment status updated on the Agency's Background Screening Clearinghouse website within 5 business days for staff hired in 2024. This has the potential for staff with disqualifying offenses to have access to adults. The findings included: 1. Record review showed staff E was hired and was terminated on . Review of the Agency's clearing house employee roster revealed staff E was still included as an active employee listed on the facility's background screening clearing house website roster. 2. Record review showed the facility's Extended	CZ814		

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CZ814	Continued From page 2 Congregate Care (ECC) Registered Nurse (RN) was hired and was not included on the facility's background screening clearing house website. 3. Record review showed that the facility's Administrator was hired on and was added on the facility background screen clearing house website on , past the 5 days as required. 4. On at 11:30 a.m., the Business Office Manager confirmed staff E was still active on the facility's background screen clearing house roster, the ECC Registered Nurse was not included on the clearing house roster, and the Administrator was added late on the clearing house roster. 5. The Administrator acknowledged on at 4:00 p.m., staff E was still active on the facility's clearing house roster, the ECC nurse was not included on the facility background screen clearing house roster, and she was added late on the background screening clearing house roster. Unclassified .	CZ814		