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
	AL11965013	A. BUILDING: _____ B. WING _____	11/21/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HUNTER'S CROSSING PLACE-MEMORY CARE	4607 NW 53RD AVENUE GAINESVILLE, FL 32606

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ZZ875	430.5025(4 &) / ; Training (4) Employees of covered providers must complete the following training for 's and related forms of : (a) Upon beginning employment, each employee must receive basic written information about interacting with persons who have 's or related forms of . (b) Within 30 days after beginning employment, each employee who provides personal care to or has regular contact with participants, patients, or residents must complete a 1-hour training program provided by the department. 1. The department shall provide training that is available online at no cost. The 1-hour training program shall contain information on understanding the basics about the most common forms of , how to identify the signs and symptoms of , and skills for communicating and interacting with persons with ' s or related forms of . A record of the completion of the training program must be made available to the covered provider which identifies the training curricula, the name of the employee, and the date of completion. 2. A covered provider must maintain a record of the employee's completion of the training program and, upon written request of the employee, provide the employee with a copy of the record of completion consistent with the employer's written policies. 3. An employee who has completed the training required in this subsection is not required to repeat the program upon changing employment to a different covered provider. (c) Within 7 months after beginning employment for a home health agency, nurse registry, or companion or homemaker service provider, each	ZZ875		

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ZZ875	Continued From page 1	ZZ875		

employee who provides personal care must complete 2 hours of training in addition to the training required in paragraphs (a) and (b). The additional training must include, but is not limited to, behavior management, promoting the person ' s independence in activities of daily living, and skills in working with families and caregivers.
(d) Within 7 months after beginning employment for a nursing home, an assisted living facility, an adult family-care home, or an adult day care center, each employee who provides personal care must complete 3 hours of training in addition to the training required in paragraphs (a) and (b). The additional training must include, but is not limited to, behavior management, promoting the person's independence in activities of daily living, skills in working with families and caregivers, group and individual activities, maintaining an appropriate environment, and ethical issues.
(e) For an assisted living facility, adult family-care home, or adult day care center that advertises and provides, or is designated to provide, specialized care for persons with 's or related forms of , in addition to the training specified in paragraphs (a) and (b), employees must receive the following training:
1. Within 3 months after beginning employment, each employee who provides personal care to or has regular contact with the residents or participants must complete the additional 3 hours of training as provided in paragraph (d).
2. Within 6 months after beginning employment, each employee who provides personal care must complete an additional 4 hours of -specific training. Such training must include, but is not limited to, understanding and related forms of , the stages of 's , communication strategies, medical information,

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ZZ875	Continued From page 2 and stress management. 3. Thereafter, each employee who provides personal care must participate in at least 4 hours of continuing education each calendar year through contact hours, on-the-job training, or electronic learning . For this subparagraph, the term "on-the-job training" means a form of direct coaching in which a facility administrator or his or her designee instructs an employee who provides personal care with guidance, support, or -on experience to help develop and refine the employee's skills for caring for a person with 's or a related form of . The continuing education must cover at least one of the topics included in the -specific training in which the employee has not received previous training in the previous calendar year. The continuing education may be fulfilled and documented in a minimum of one quarter-hour increments through on-the-job training of the employee by a facility administrator or his or her designee or by an electronic learning chosen by the facility administrator. On-the-job training may not account for more than 2 hours of continuing education each calendar year. (f)1. An employee provided, assigned, or referred by a health care services pool must complete the training required in paragraph (c), paragraph (d), or paragraph (e) that is applicable to the covered provider and the position in which the employee will be working. The documentation verifying the completed training and continuing education of the employee, if applicable, must be provided to the covered provider upon request. 2. A health care services pool must verify and maintain documentation as required under s. 400.980(5) before providing, assigning, or referring an employee to a covered provider.	ZZ875		

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ZZ875	Continued From page 3 (7) For a certified nursing assistant as defined in s. 464.201, training hours completed as required under this section may count toward the total hours of training required to maintain certification as a nursing assistant. (8) For a health care practitioner as defined in s. 456.001, training hours completed as required under this section may count toward the total hours of continuing education required by that practitioner's licensing board. (9) Each person employed, , or referred to provide services before , , must complete the training required in this section before , . Proof of completion of equivalent training completed before , , shall substitute for the training required in subsection (4). Each person employed, , or referred to provide services on or after , , may complete training using approved curriculum under paragraph (5)(d) until the effective date of the rules adopted by the department under subsection (6). This Statute or Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure 2 of 3 staff sampled (Staff A, Medication Technician and Staff C, Medication Technician) received three hours of training for and related forms of within three months of beginning employment, and failed to ensure 1 of 3 staff sampled (Staff A, Medication Technician) received an additional four hours of -specific training within six months of beginning employment. Findings: Review of employee records conducted on	ZZ875		

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ZZ875	Continued From page 4 revealed Staff A, Medication Technician with a hire date of . Staff A's record did not contain documentation evidence of any training for 's and related forms of . Review of employee records conducted on revealed Staff C, Medication Technician with a hire date of . Staff C's record did not contain documentation evidence of any training for 's and related forms of . During an interview on at 9:31 AM, the Wellness Director confirmed that Staff A and Staff C did not have the required training. Class III	ZZ875		
A 000	Initial Comments An unannounced change of ownership survey with Emergency Power Plan and Limited Nursing Services monitoring was conducted at Radiance of Gainesville A Memory Care Community on . through . . Deficiencies were identified at the time of the survey.	A 000		
A 078	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	A 078		

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A 078	Continued From page 5 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 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	A 078		

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A 078	Continued From page 6 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 record review and interview, the facility failed to document evidence of an annual negative examination for 2 of 3 staff sampled (Staff A, Medication Technician and Staff B, Medication Technician), and failed to ensure 3 of 3 staff sampled (Staff A, Medication Technician, Staff B, Medication Technician and Staff C, Medication Technician) submitted a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable within 30 days after beginning employment. Findings Include: Review of employee records conducted on revealed Staff A, Medication Technician with a hire date of . Staff A's records did not have documentation evidence of an annual examination. Staff A's record also revealed no written statement from a health care provider documenting that the	A 078		

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A 078	Continued From page 7 individual does not have any signs or symptoms of communicable . Review of employee records conducted on revealed Staff B, Medication Technician with a hire date of . Staff B's records did not have documentation evidence of an annual examination. Staff B's record also revealed no written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable . Review of employee records conducted on revealed Staff C, Medication Technician with a hire date of . Staff C's record did not have documentation of a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable . On at 9:34 AM, during an interview with the Wellness Director, she stated, "We will have to send them to get another [ ] test." Class III	A 078		
A 090	59A-36.011(11) FAC Training - (11) TRAINING. (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 .	A 090		

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A 090	Continued From page 8 (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. (c) Training shall consist of the information included in rule 59A-36.009, F.A.C. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure 3 of 3 staff sampled (Staff A, Medication Technician, Staff B, Medication Technician, and Staff C, Medication Technician) received at least one hour of training in the facility's policies and procedures regarding within 30 days after employment. Findings Include: Review of employee records conducted on revealed Staff A, Medication Technician with a hire date of . Staff A's record did not have documentation evidence of a completed Training. Review of employee records conducted on revealed Staff B, Medication Technician with a hire date of . Staff B's record did not have documentation evidence of a completed Training. Review of employee records conducted on revealed Staff C, Medication Technician with a hire date of . Staff C's record did not have documentation evidence of a completed Training.	A 090		

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A 090	Continued From page 9 On at 9:31 AM during an interview with the Wellness Director, she stated, "We did not have a training system with [former company's name], and we are waiting for the new company to get one. Right now we are doing all the training in house." Class III	A 090		