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
	AL11969275	A. BUILDING: _____ B. WING _____	04/30/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SEASIDE AT FORT MYERS	15800 BEACHWALK BLVD FORT MYERS, FL 33908

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A 000	Initial Comments An unannounced relicensure, extended congregate care, limited nursing services, emergency power plan monitoring, health facility reporting system, and visitation form survey was conducted on at Seaside at Fort Myers, an assisted living facility in Fort Myers, Florida. The following is the description of the deficiencies. .	A 000		
A 080 SS=D	429.52( ) FS; 59A-36.011(1) FAC Training - Core & Competency Test 429.52 (2) Administrators and other assisted living facility staff must meet minimum training and education requirements established by the agency by rule. This training and education is intended to assist facilities to appropriately respond to the needs of residents, to maintain resident care and facility standards, and to meet licensure requirements. (3) The agency, in conjunction with providers, shall develop core training requirements for administrators consisting of core training learning objectives, a competency test, and a minimum required score to indicate successful passage of the core competency test. The required core competency test must cover at least the following topics: (a) State law and rules relating to assisted living facilities. (b) Resident rights and identifying and reporting , neglect, and , . (c) Special needs of elderly persons, persons with mental illness, and persons with , and how to meet those needs. (d) Nutrition and food service, including acceptable sanitation practices for preparing,	A 080		

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A 080	Continued From page 1 storing, and serving food. (e) Medication management, recordkeeping, and proper techniques for assisting residents with self-administered medication. (f) Firesafety requirements, including fire evacuation drill procedures and other emergency procedures. (g) Care of persons with and related . 59A-36.011 (1) ASSISTED LIVING FACILITY CORE TRAINING REQUIREMENTS AND COMPETENCY TEST. (a) The assisted living facility core training requirements established by the department pursuant to section 429.52, F.S., shall consist of a minimum of 26 hours of training plus a competency test. (b) Administrators and managers must successfully complete the assisted living facility core training requirements within 3 months from the date of becoming a facility administrator or manager. Successful completion of the core training requirements includes passing the competency test. The minimum passing score for the competency test is 75%. Administrators who have attended core training prior to , , and managers who attended the core training program prior to , , , shall not be required to take the competency test. Administrators licensed as nursing home administrators in accordance with chapter 468, part II, F.S., are exempt from this requirement. (c) Administrators and managers shall participate in 12 hours of continuing education in topics related to assisted living every 2 years. (d) A newly hired administrator or manager who has successfully completed the assisted living	A 080		

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A 080	Continued From page 2 facility core training and continuing education requirements, shall not be required to retake the core training. An administrator or manager who has successfully completed the core training but has not maintained the continuing education requirements will be considered a new administrator or manager for the purposes of the core training requirements and must: 1. Retake the assisted living facility core training; and, 2. Retake and pass the competency test. (e) The fees for the competency test shall not exceed $200.00. The payment for the competency test fee shall be remitted to the entity administering the test. A new fee is due each time the test is taken. This Statute or Rule is not met as evidenced by: Based on records reviewed and staff interviews the facility failed to ensure staff completed the required core training including 26 hours of training and a competency test. The findings included: Record review showed that the facility's administrator was hired on . Further review showed evidence that the administrator successfully passed the CORE Competency test on . There was no evidence of the 26 hours CORE training in the employee records. During an interview the facility's administrator said on at 11:45 a.m., she completed the core training on line and did not recall the details or date of completion. On at 3:00 p.m., the administrator said	A 080		

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A 080	Continued From page 3 she will be following up and submit the required document via email/fax. No further information received. Class III	A 080		
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. 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	A 081		

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A 081	Continued From page 4	A 081		

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 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

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A 081	Continued From page 5 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: 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.	A 081		

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A 081	Continued From page 6 (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 interview the facility failed to ensure employees completed required trainings within 30 days of hire for 2 (Staff A, B) out of 3staff records reviewed . The findings included: 1. Record review revealed staff A (caregiver) was hired on . Staff B (caregiver/medication technician) was hired on . 2. Record review for Staff A and Staff B revealed no evidence of documentation to show completion of the required in-service training regarding the facility's elopement response policies and procedures. Further review revealed there was no evidence of documentation of Staff A and B's understanding and competency in the implementation of the elopement response policies and procedures. There was no evidence Staff A and B received a copy of the facility's elopement policy and procedure.	A 081		

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A 081	Continued From page 7 3. Record review showed no evidence of documentation that Staff A and Staff B completed 1 hour in-service training that covers the following topics for Reporting Adverse Incidents and facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. 4. Record review for Staff A and B found no evidence of completion of 3 hours of in-service training within 30 days of employment that covers the following subjects: a. Resident behavior and needs. b. Providing assistance with the activities of daily living (ADL's) . On at 3:00 p.m., during an interview the Administrator confirmed Staff A and B did not complete the required elopement response in-service training, there was no evidence of competency for Staff A and B, and no evidence Staff A and B received a copy of the facility's elopement response policy and procedure. The Administrator also confirmed that Staff A and B did not have the required 3 hours ADL training, and did not receive the 1 hour in-service training that covers the following subjects: Reporting adverse incidents and facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. Class III .	A 081		
A 084 SS=D	59A-36.011(6) FAC 429.52(6), FS Training - Assis Self-Admin Meds & Med Mgmt 59A-36.011	A 084		

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A 084	Continued From page 8 (6) ASSISTANCE WITH THE SELF-ADMINISTRATION OF MEDICATION AND MEDICATION MANAGEMENT. Unlicensed persons who will be providing assistance with the self-administration of medications as described in rule 59A-36.008, F.A.C., must meet the training requirements pursuant to section 429.52(6), F.S., prior to assuming this responsibility. Courses provided in fulfilment of this requirement must meet the following criteria: (a) Training must cover state law and rule requirements with respect to the supervision, assistance, administration, and management of medications in assisted living facilities; procedures and techniques for assisting the resident with self-administration of medication including how to read a prescription label; providing the right medications to the right resident; common medications; the importance of taking medications as prescribed; recognition of side effects and adverse reactions and procedures to follow when residents appear to be experiencing side effects and adverse reactions; documentation and record keeping; and medication storage and disposal. Training shall include demonstrations of proper techniques, including techniques for control, and ensure unlicensed staff have adequately demonstrated that they have acquired the skills necessary to provide such assistance. (b) The training must be provided by a registered nurse or licensed pharmacist who shall issue a training certificate to a trainee who demonstrates, in person and both physically and verbally, the ability to: 1. Read and understand a prescription label; 2. Provide assistance with self-administration in accordance with section 429.256, F.S., and rule 59A-36.008, F.A.C., including:	A 084		

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A 084	Continued From page 9 a. Assist with oral dosage forms, , dosage forms, and , , , and dosage forms; b. Measure liquid medications, break scored tablets, and crush tablets in accordance with prescription directions; c. Recognize the need to obtain clarification of an "as needed" prescription order; d. Recognize a medication order which requires judgment or discretion, and to advise the resident, resident's health care provider or facility employer of inability to assist in the administration of such orders; e. Complete a medication observation record; f. Retrieve and store medication; g. Recognize the general signs of adverse reactions to medications and report such reactions; h. Assist residents with syringes that are prefilled with the proper dosage by a pharmacist and , that are prefilled by the manufacturer by taking the medication, in its previously dispensed, properly labeled container, from where it is stored, and bringing it to the resident for self-injection; i. Assist with ; j. Use a to perform testing; k. Assist residents with and continuous positive airway pressure (CPAP) devices, excluding the titration of the levels; l. Apply and remove stockings and hosiery; m. Placement and removal of , bags, excluding the removal of the or manipulation of the site; and, n. Measurement of , , rate, temperature, and , rate.	A 084		

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A 084	Continued From page 10 (c) Unlicensed persons, as defined in section 429.256(1)(b), F.S., who provide assistance with self-administered medications and have successfully completed the initial 6 hour training, must obtain, annually, a minimum of 2 hours of continuing education training on providing assistance with self-administered medications and safe medication practices in an assisted living facility. The 2 hours of continuing education training may be provided online. (d) Trained unlicensed staff who, prior to the effective date of this rule, assist with the self-administration of medication and have successfully completed 4 hours of assistance with self-administration of medication training must complete an additional 2 hours of training that focuses on the topics listed in sub-subparagraphs (6)(b)2.h.-n. of this section, before assisting with the self-administration of medication procedures listed in sub-subparagraphs (6)(b)2.h.-n. 429.52 (6) Staff assisting with the self-administration of medications under s. 429.256 must complete a minimum of 6 additional hours of training provided by a registered nurse or a licensed pharmacist before providing assistance. Two hours of continuing education are required annually thereafter. The agency shall establish by rule the minimum requirements of this training This Statute or Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure that unlicensed staff who provide assistance with self administration of medications has successfully completed the initial 6-hour training required for 1 (Staff B) out 3 staff records reviewed.	A 084		

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A 084	Continued From page 11 The findings included: 1. Record review for Staff B revealed a hire date of on as a caregiver/medication technician. 2. Further review revealed documentaion of a certificate of completion for 2 hour refresher course for assisting residents with their self administration medication dated . There was no documentaiton of completion of the required initial 6-hours of medication training. On at 11:00 a.m., during an interview the Administrator confirmed Staff B was a medication technician and assisted residents with self administration of medications. The Administrator said she was pretty sure that the facility's Director of Clinical Services (DCS) had a copy of the initial 6-hour training for Staff B. On at 11:10 a.m., during an interview, the DCS confirmed Staff B was a medication technician and assisted residents with self administration of medications. The DCS said that all medication technicians in the facility had the initial 6-hour training. No evidence of documentation of completion of 6 hours of medication training for Staff B was provided by the facility. Class III .	A 084		
A 090 SS=D	59A-36.011(11) FAC Training -	A 090		

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A 090	Continued From page 12 (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 . (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 employees completed 1 hour in-service training within 30 days of employment for ( ) based on the facility policies and procedures for 2 (Staff A, B) out of 3 records reviewed. The findings included: 1. Record review for Staff A caregiver revealed a hire date of . Further review revealed no evidence of completion of 1 hour in-service training within 30 days of employment for . 2 . Record review for Staff B caregiver/medication technician revealed a hire date of . Further review revealed no evidence of completion of 1 hour in-service training within 30 days of employment for . On at 3:00 p.m., during an interview, the Administrator confirmed Staff A and B did not complete the required 1 hour in-service training	A 090		

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A 090	Continued From page 13 within 30 days of employment for ( ). Class III .	A 090		
AE210 SS=D	59A-36.011(8) FAC ECC - Training (8) EXTENDED CONGREGATE CARE (ECC) TRAINING. (a) The administrator and ECC supervisor, if different from the administrator, must complete core training and 4 hours of initial training in extended congregate care prior to the facility receiving its ECC license or within 3 months of beginning employment in a currently licensed ECC facility as an administrator or ECC supervisor. Successful completion of the assisted living facility core training shall be a prerequisite for this training. ECC supervisors who attended the assisted living facility core training prior to , shall not be required to take the assisted living facility core training competency test. (b) The administrator and the ECC supervisor, if different from the administrator, must complete a minimum of 4 hours of continuing education every two years in topics relating to the physical, , or social needs of frail elderly and persons, or persons with or related . (c) All direct care staff providing care to residents in an ECC program must complete at least 2 hours of in-service training, provided by the facility administrator or ECC supervisor, within 6 months of beginning employment in the facility. The training must address ECC concepts and requirements, including statutory and rule requirements, and the delivery of personal care	AE210		

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AE210	Continued From page 14 and supportive services in an ECC facility. This Statute or Rule is not met as evidenced by: Based on record review, and interview, the facility failed to ensure completion of 4 hours of initial training in extended congregate care within 3 months from the beginning of employment for 1 (Administrator) of 3 records reviewed. The facility failed to ensure that direct care staff had 2 hours of extended congregate care training completed within 6 months of employment for 1(Staff B) of 3 records reviewed. The findings included: Record review revealed the Administrator was hired on . Further review revealed no documentation of completion of the 4 hours initial training in extended congregate care (ECC) within 3 months from the beginning of employment. On at 11:43 a.m., during an interview, the Administrator said no one ever told her that she needed to complete ECC training. Record review revealed Staff B (caregiver) was hired on . Further review revealed no documentation of completion of 2 hours of extended congregate care training within 6 months of hire. On at 3:00 p.m., during an interview, the Administrator acknowledged that herself and Staff B did not complete the required ECC training. Class III .	AE210		