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
	AL11965330	A. BUILDING: _____ B. WING _____	11/13/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ARCADIA OAKS ASSISTED LIVING	1013 EAST GIBSON STREET ARCADIA, FL 34266

(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 relicensure, emergency power plan monitoring and health facility reporting system survey was conducted at Arcadia Oaks on through . Deficiencies were identified at the time of the visit. .	A 000		
A 054 SS=E	59A-36.008(5) FAC Medication - Records (5) MEDICATION RECORDS. (a) For residents who use a pill organizer managed in subsection (2), the facility must keep either the original labeled medication container; or a medication listing with the prescription number, the name and address of the issuing pharmacy, the health care provider's name, the resident's name, the date dispensed, the name and strength of the drug, and the directions for use. (b) The facility must maintain a daily medication observation record for each resident who receives assistance with self-administration of medications or medication administration. A medication observation record must be immediately updated each time the medication is offered or administered and include: 1. The name of the resident and any known the resident may have; 2. The name of the resident's health care provider and the health care provider's telephone number; 3. The name, strength, and directions for use of each medication; and, 4. A chart for recording each time the medication is taken, any missed dosages, refusals to take medication as prescribed, or medication errors. (c) For medications that serve as chemical	A 054		

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A 054	Continued From page 1 , the facility must, pursuant to Section 429.41, F.S., maintain a record of the prescribing physician's annual evaluation of the use of the medication. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to update the Medication Observation Record immediately after assistance with self-administration of medications for for 3 (Resident #4, #8, #10) of 3 resident records reviewed. The findings included: On , review of the log, for Resident # 4 revealed: , 5-325 mg (, relief) was given on at 12:40 p.m., at 8:15 p.m., at 8:00 p.m., and at 8:00 a.m., 2:00 p.m., 8:00 p.m., at 8:00 a.m. and 2:00 p.m., at 8:00 a.m., and at 2:00 p.m.. Further review showed no documentation found in the Medication Observation Record with staff signature or initials to indicate Resident #4 received , 5-325 mg on those dates and times. On , d review of the log for Resident #8 revealed: , 10-325 mg (, relief) was given on , and at 8:00 a.m., and at 8:00 a.m. and 2:00 p.m., and at 8:00 a.m.. Further review showed no documentation found in the Medication Observation Record of staff signatures and or initials to indicate Resident #8 received , 10-325 mg on those dates and times.	A 054		

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A 054	Continued From page 2 On , review of the log for Resident #10 revealed: 5-325 mg (, relief) was given on at 3:40 p.m., and at 8:00 a.m. and 2:00 p.m., and and at 8:00 a.m.. Further review showed no documentation found in the Medication Observation Record of staff signatures and or initials to indicate Resident #10 received 5-325 mg on those dates and times. On at 9:38 a.m., during an interview, Medication Technician Staff A said that she makes sure that the log is documented, she acknowledged that they sometimes forget to document in the Medication Observation Record. On at 10:00 a.m., during an interview, the Executive Director (ED) said it takes 5 screens to get to the page where you document medications on the Electronic Medication Observation Record (EMOR) and it is a struggle to document as needed (PRN) medications in the EMOR because of the time and lack of ease with access. The ED said acknowledged that there is a higher likelihood of missing medications if the documentation is not filled out in its entirety and is not audited on a regular basis. The ED confirmed there are errors in documentation and that this is against regulation and needs to be fixed. Class III. . ** Photographic Evidence Obtained ** Class III	A 054		

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A 081	Continued From page 3	A 081		
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 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.	A 081		

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A 081	Continued From page 4 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 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	A 081		

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A 081	Continued From page 5 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. (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	A 081		

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A 081	Continued From page 6 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 reviews and interviews, the facility failed to ensure staff completed 2 hours of preservice orientation prior to interacting with residents and complete required in-services training within 30 days of hire based on the facility policies and procedures for 3 (Staff B, D, E) of 4 records reviewed. The findings included: Review of the employee file for Staff B revealed a hire date of as a caregiver/medication technician. Further review of Staff B's file revealed documentation of certificate of completion for 2 hours of preservice orientation completed on , the documentation contained no location where the training was completed, 2 hours of preservice orientation training dated , 1 hour of control training dated , elopement and training dated , Residents Rights, and , neglect and , training dated through myalftraining.com, a computer-based online training system. Review of the employee record for Staff D revealed a hire date of as a caregiver/medication technician. Further review of	A 081		

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A 081	Continued From page 7 Staff D's file revealed documentation of certificate of completion for 2 hours of preservice orientation completed on , the documentation contained no location where the training was completed, 2 hours of preservice orientation training dated , 1 hour of control training dated , elopement and training dated , Residents Rights training dated , and , neglect and , training dated through myalftraining.com, a computer-based online training system. Review of the employee record for Staff E revealed a hire date of as a caregiver. Further review of Staff E's file revealed documentation of certificate of completion for 2 hours of preservice orientation completed on , the documentation contained no location where the training was completed, 2 hours of preservice orientation training dated , 1 hour of control training dated , elopement and training dated , Residents Rights and , neglect and , training dated through myalftraining.com, a computer-based online training system. On at 10:35 a.m., during an interview, the Administrator said she is responsible for the employee records. The Administrator said for the employees training they use myalftraining.com for the training, and the preservice orientation is done online through myalftraining.com also, and the training online is general training and is not based on the facility policy and procedures. On at 10:47 a.m., The Administrator reviewed the documentation for the preservice orientation completed by the employees and said	A 081		

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A 081	Continued From page 8 she did not realize it was documented myalfboss, on the bottom of the documentation. The Administrator said they use the documentation as a statement to sign but the training is done through myafltraining.com online. On at 10:55 a.m., during an interview, the Administrator confirmed the training was not completed based on the facility policies and procedures and preservice orientation does not list the location where the training was completed. Class III .	A 081		
A 090 SS=D	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 . (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 staff complete 1 hour of ( ) training within 30	A 090		

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A 090	Continued From page 9	A 090		

days of hire based on the facility policies and procedures for 3 (Staff B, D, E) of 4 employee records reviewed.

The findings included:

Review of the employee file for Staff B revealed a hire date of as a caregiver/medication technician. Further review of Staff B file contained documentation of a certificate of completion for 1 hour of training for ( ) training dated , through myalftraining.com, an online computer-based training system. The training was not completed based on facility policies and procedures.

Review of the employee record for Staff D revealed a hire date of as a caregiver/medication technician. Further review of Staff D's file contained documentation of a certificate of completion for 1 hour of training for ( ) training dated , through myalftraining.com, an online computer-based training system. The training was not completed based on facility policies and procedures.

Review of the employee record for Staff E revealed a hire date of as a caregiver. Further review of Staff E's file contained documentation of a certificate of completion for 1 hour of training for ( ) training dated , through myalftraining.com, an online computer-based training system. The training was not completed based on facility policies and procedures.

On at 10:55 a.m., during an interview, the Administrator confirmed the training was not completed based on the facility policies and

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A 090	Continued From page 10 procedures. Class III .	A 090		
A 091 SS=D	59A-36.011(12) FAC Training - Documentation & Monitoring (12) TRAINING DOCUMENTATION AND MONITORING. (a) Except as otherwise noted, certificates, or copies of certificates, of any training required by this rule must be documented in the facility's personnel files. The documentation must include the following: 1. The title of the training program, 2. The subject matter of the training program, 3. The training program agenda, 4. The number of hours of the training program, 5. The trainee's name, dates of participation, and location of the training program, 6. The training provider's name, dated signature and credentials, and professional license number, if applicable. (b) Upon successful completion of training pursuant to this rule, the training provider must issue a certificate to the trainee as specified in this rule. (c) The facility must provide the Department of Elder Affairs and the Agency for Health Care Administration with training documentation and training certificates for review, as requested. The department and agency reserve the right to attend and monitor all facility in-service training, which is intended to meet regulatory requirements. This Statute or Rule is not met as evidenced by:	A 091		

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A 091	Continued From page 11 Based on record review and interview, the facility failed to ensure training documentation and certificates of training completed by staff contained the required components per 59A-36.011(12) FAC. The findings included: Review of the employee file for Staff B revealed a hire date of as a caregiver/medication technician. Further review of Staff B's file revealed documentation of certificate of completion for 2 hours of preservice orientation completed on , the documentation contained no location where the training was completed. Review of the employee record for Staff D revealed a hire date of as a caregiver/medication technician. Further review of Staff D's file revealed documentation of certificate of completion for 2 hours of preservice orientation completed on , the documentation contained no location where the training was completed. Review of the employee record for Staff E revealed a hire date of as a caregiver. Further review of Staff E's file revealed documentation of certificate of completion for 2 hours of preservice orientation completed on , the documentation contained no location where the training was completed. On at 10:47 a.m., The Administrator reviewed the documentation for the preservice orientation completed by the employees and said she did not realize it was documented myalfboss, on the bottom of the documentation. The Administrator said they use the documentation as	A 091		

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A 091	Continued From page 12 a statement to sign but the training is done through myafltraining.com online. On at 10:55 a.m., during an interview, the Administrator confirmed the preservice orientation does not indicate the location where the training was completed. Class III .	A 091		