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
	AL11964811	A. BUILDING: _____ B. WING _____	12/09/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PEACEFUL HOME ASSISTED LIVING	66 PATRIC DRIVE PALM COAST, FL 32164

(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 A relicensure survey was conducted at Peaceful Home on . Deficiencies were identified at the time of the survey.	A 000		
A 033	59A-36.007(8) PHYSICAL (8) PHYSICAL . Residents for whom a physician has prescribed a physical must have a written care plan for the use of the physical . The care plan must be developed within 14 days of the device being prescribed, and prior to use on the resident. (a) The care plan must specify: 1. The device prescribed for use; 2. The maximum amount of time the resident is to have the applied each day; and, 3. In what manner and frequency staff will monitor, observe, and report to the physician any injuries, increase in agitation, signs and symptoms of , , or decline in mobility or function related to the use of the prescribed . (b) Facility staff must ensure that the device is applied appropriately and safely. (c) The resident's physician must review the appropriateness of the continued use of the physical annually, and documentation of this review must be maintained in the resident's record. If the resident's ability to independently remove or avoid the device fluctuates, the device must be considered a physical and all requirements of this subsection apply. This Statute or Rule is not met as evidenced by: based on observation, interview, and record review, the facility failed to ensure a care plan for the use of a was created within 14 days for 1 of 6 residents of the facility.	A 033		

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A 033	Continued From page 1 The findings include: At 8:55am on , Resident #6 was observed in her bed with full bed rails up on each side of her bed. Resident #6's record showed she was admitted on and under the care of hospice. Her 1823 health assessment showed she was bedridden and required total assistance for activities of daily living. Photographic evidence obtained. The record did not have the physician's order for the bed rails, or a care plan regarding their use, in either the facility documentation, or the records created by the hospice provider which were filed in her chart. In an interview with the Administrator at 10:55am on , she was asked about the care plan for the bed rails. She stated she believed hospice documented this on the 1823 health assessment form. She reviewed the assessment and confirmed it didn't state she required full bed rails. She also confirmed a care plan had not yet been created for Resident #6's bed rails. Class III	A 033		
A 083	59A-36.011(5) FAC Training - First Aid and (5) FIRST AID AND ( ). A staff member who has completed courses in First Aid and and holds a currently valid card documenting completion of such courses must be in the facility at all times. (a) Documentation that the staff member possess current certification that requires the student to demonstrate, in person, that he or she is able	A 083		

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A 083	Continued From page 2 to perform and which is issued by an instructor or training provider that is approved to provide training by the American Red Cross, the American Association, the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education satisfies this requirement. (b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, Part III, F.S., shall be considered as having met the training requirements for both First Aid and C.P.R. This Statute or Rule is not met as evidenced by: Based on observation, interview, and record review, the facility failed to ensure a staff person with current First Aid and credentials was present in the facility at all times to care for the 6 residents of the facility. The findings include: Upon arrival to the facility on at 7:40am, the Administrator was observed to be the sole staff person available for the 6 residents. A review of the Administrator's record showed she had First Aid and training, but it expired in 2024. No current trainings were located. In an interview with the Administrator on at 10:06am, she confirmed her trainings were expired and would need to get them updated. Class III	A 083		

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A 085	Continued From page 3	A 085		
A 085	59A-36.011(7) FAC Training - Nutrition & Food Service (7) NUTRITION AND FOOD SERVICE. The administrator or person designated by the administrator as responsible for the facility's food service and the day-to-day supervision of food service staff must obtain, annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility. This requirement does not apply to administrators and designees who are exempt from training requirements under paragraph 59A-36.012(1)(b). A certified food manager, licensed dietician, registered dietary technician or health department sanitarian is qualified to train assisted living facility staff in nutrition and food service. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure the Administrator completed 2 hours of continuing education annually in food service and nutrition, when serving as the food service designee to the 6 residents of the facility. The findings include: Review of the record for the Administrator showed she received food service training in 2023. There were no other credentials located in her file, or subsequent training certificates related to food service/nutrition dated after this training. In an interview with the Administrator on at 10:06am, she confirmed she was the person in charge of food service for the 6 residents. She stated she had not had food service/nutrition training since the 2023 class.	A 085		

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A 085	Continued From page 4 Class III	A 085		