

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968979	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 01/13/2026
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

BEACH HOUSE NAPLES ASSISTED LIVING & I

**1000 AIRPORT PULLING RD S
NAPLES, FL 34104**

(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 Complaints A revisit to a complaint survey was conducted at Beach House Naples Assisted & Memory Care on 1/12/26 through 1/13/26. This survey was done in conjunction with a relicensure survey. Deficiencies were identified at the time of the survey.	{A 000}		
{A 081} SS=E	429.52(1 & 7) FS; 59A-36.011(2-3) 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 pre-service orientation provided by the facility before interacting with residents. The pre-service 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 pre-service 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 pre-service orientation required under paragraph (a).	{A 081}		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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{A 081}	Continued From page 1 (7) Facility staff shall participate in in service training relevant to their job duties as specified by agency rule. Topics covered during the pre service or entation are not required to be repeated during in service training. A single certificate of completion that covers all required in service 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 pre service or entation 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 pre service or entation prior to interacting with residents. (c) Once complete, the employee and the facility administrator must sign a statement that the employee completed the pre service or entation which must be kept in the employee's personnel record. (d) In addition to topics that may be chosen by the facility administrator, the pre service or entation 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	{A 081}		

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(A 081)	Continued From page 2 59A-8.0095, F.A.C., must receive a minimum of 1 hour in service training in infection control, including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use infection control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to blood borne pathogens, 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 abuse, neglect, and exploitation. The facility must use abuse 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	(A 081)			

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(A 081)	Continued From page 3 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 interview, the facility failed to ensure all direct care employees completed 3 hours of Activities of Daily Living (ADL) and Behavioral Needs training, 1 hour of Elopement Response training based on specific facility-based policies and procedures, 1 hour of Nutrition and Safe Food Handling training, and 1 hour of Adverse Incident and Emergency Response Training for 4 (ED, DOW, Staff D, Staff E) out of 4 records reviewed. The findings included: On 1/13/26, record review of employee files revealed that the Executive Director (ED) had a hire date of 11/3/25. There was no 3 hour ADL and Behavioral Needs training, 1 hour of Nutrition and Safe Food Handling training, and 1 hour of	(A 081)		

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{A 081}	Continued From page 4 Adverse Incident and Emergency Response training documented in the ED's file. On 1/13/26, record review of employee files revealed that the Director of Wellness (DOW) had a hire date of 12/1/25. There was no 1 hour of Nutrition and Safe Food Handling training, Elopement Response training, and 1 hour of Adverse Incident and Emergency Response training documented in the DOW's file. On 1/13/26, record review of employee files revealed that Medication Technician (MT) Staff D had a hire date of 10/8/25. There was no 3 hour ADL and Behavioral Needs training, 1 hour of Nutrition and Safe Food Handling training, Elopement Response training, and 1 hour of Adverse Incident and Emergency Response training documented in MT Staff D's file. On 1/13/26, record review of employee files revealed that Resident Assistant (RA) Staff E had a hire date of 10/8/25. There was no 3 hour ADL and Behavioral Needs training, 1 hour of Nutrition and Safe Food Handling training, Elopement Response training, and 1 hour of Adverse Incident and Emergency Response training documented in RA Staff E's file. On 1/13/26 at 11:30 a.m., during an interview, the Executive Director (ED) said there was no one in charge of employee records as she terminated the previous Business Office Manager when she arrived in November. The ED said she really has no idea where she stands in regard to staff records, but said that she knows what the regulations are. The ED said that she needs to audit each and every employee file to check for compliance. She said that she has taken the CORE training but has yet to take the exam.	{A 081}			

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{A 081}	Continued From page 5 On 1/13/26 at 12:20 p.m., during an interview, the ED said that the facility has a contract with Relias, but none of the training had been done either. Class III .	{A 081}		