

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953532	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/26/2026
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

LELY PALMS (NAPLES)

**1000 LELY PALMS DRIVE
NAPLES, FL 34113**

(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 Change of Owner p, Emergency Power Plan Monitoring and Health Facility Reporting System survey was conducted at Lely Palms (Naples) on 3/26/26. Defeciciencies were identified at the time of the survey.	A 000		
A 081 SS=D	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 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	A 081		

AHCA Form 3020-0001

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

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A 081	Continued From page 1 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. 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 infection control,	A 081			

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A 081	Continued From page 2 including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use its 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 its 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 taken the assisted living facility core training must receive a minimum of 1-hour-in-service training	A 081			

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A 081	Continued From page 3 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 interview, and record review, the facility failed to ensure 4 (Resident Care Coordinator/Licensed Practical Nurse (RCC/LPN, Staff H, I, and J) of 14 staff completed the Department of Elder Affairs (DOEA) 1-hour video training within 30 days of working at the facility. The findings included: The Clearinghouse Roster revealed the RCC/LPN was hired on 1/7/26; Staff H was hired on 11/19/24; Staff I was hired at the facility on 12/17/25; and Staff J was hired on 2/12/26. On 3/26/26 at 5:16 p.m., during an interview, the Administrator provided the DOEA 1-hour training certificates for Staff A, B, C, D, E, F, and G. The Administrator said she did not have training certificates for the RCC/LPN, Staff H, I, or J.	A 081			

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A 081	Continued From page 4	A 081			
	Class III				
A 083 SS=D	59A-36.011(5) FAC Training - First Aid and CPR (5) FIRST AID AND CARDIOPULMONARY RESUSCITATION (CPR). A staff member who has completed courses in First Aid and CPR and holds a currently valid card documenting completion of such courses must be in the fac ty at all times. (a) Documentation that the staff member possess current CPR certification that requires the student to demonstrate, in person, that he or she is able to perform CPR and ch is issued by an instructor or training provider that is approved to provide CPR training by the American Red Cross, the American Heart 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 interview, and record review, the fac ty failed to ensure a staff member who had completed a recognized course in First Aid was always in the fac ty from 2/15/26 through 3/25/26 for 9 (Staff A, B, C, D, E, G, H, I, and J) of 12 staff Caregiver and Medication Techs reviewed for First Aid. The lack of first aid training had the potential to negatively impact the health of any	A 083			

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A 083	Continued From page 5 resident living in the community. The findings included: On 3/26/26 at 2:36 p.m., during an interview, the Administrator said the direct care staff were not nurses, emergency medical technicians or paramedics. She said Staff A, B, C, D, E, H, I, and J had completed the American Heart Association Basic Life Support for the Provider course which included Cardiopulmonary Resuscitation (CPR) and Automatic Electronic Device training. The training did not include First Aid. Review of the direct care staff schedules from 2/15/26 through 3/25/26 revealed on Sunday, 2/15/26, there was no one with First Aid on day, evening, or night shift. Further review of the schedules revealed the following times a staff with First Aid training was not in the facility: On Wednesday and Thursday 2/18/26 and 2/19/26, there was no one with First Aid on the evening or night shift. On Friday, 2/20/26, there was no one with First Aid on the night shift. On the weekend of 2/21/26 and 2/22/26, there was no one with First Aid on the day, evening, or night shift. On Wednesday, 2/25/26, there was no one with First Aid on the night shift. On Thursday and Friday, 2/26/26 and 2/27/26, there was no one with First Aid on the night shift. On the weekend of 2/28/26 and 3/1/26, there was no one with First Aid on the day, evening, or night shift. On Tuesday 3/3/26, there was no one with First Aid on the evening shift. On Wednesday and Thursday, 3/4/26 and 3/5/26,	A 083			

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A 083	Continued From page 6 there was no one with First Aid on the evening, or n ght ft. On Friday, 3/6/26, there was no one with First Aid on the n ght ft. On the weekend of 3/7/26 and 3/8/26, there was no one with First Aid on the day, evening or n ght fts. On 3/11/26, 3/12/26, and 3/13/26, there was no one with First Aid on the evening or n ght fts. On the weekend of 3/14/26 and 3/15/26, there was no one in the fac ty with First aid on the day, evening, or n ght fts. On 3/18/26, 3/22/26, and 3/23/26, there was no one with First Aid on the evening, or n ght ft. On Wednesday 3/25/26, there was no one with First Aid on the evening or n ght fts. On 3/26/26 at 2:36 p.m., during an interview, the Administrator said she did not realize the American Heart Association BLS for the Provider training course did not include First Aid training. She looked at the schedule and said there were whole weekends and some evenings and n ghts during the week when someone with first aid was not in the fac ty. Class III ,	A 083		
A 084 SS=D	59A-36.011(6) FAC 429.52(6), FS Training - Assis Self-Admin Meds & Med Mgmt 59A-36.011 (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	A 084		

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A 084	Continued From page 7 requirements pursuant to section 429.52(6), F.S., prior to assuming this responsibility. Courses provided in fulfillment 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 infection 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. Assist with oral dosage forms, topical dosage forms, and topical ophthalmic, otic and nasal dosage forms; b. Measure liquid medications, break scored tablets, and crush tablets in accordance with prescription directions;	A 084			

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A 084	Continued From page 8 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 insulin syringes that are prefilled with the proper dosage by a pharmacist and insulin pens 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 nebulizers; j. Use a glucometer to perform blood glucose testing; k. Assist residents with oxygen nasal cannulas and continuous positive airway pressure (CPAP) devices, excluding the titration of the oxygen levels; l. Apply and remove anti-embolism stockings and hosiery; m. Placement and removal of colostomy bags, excluding the removal of the flange or manipulation of the stoma site; and, n. Measurement of blood pressure, heart rate, temperature, and respiratory rate. (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	A 084		

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A 084	Continued From page 9 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 interview, and record review, the facility failed to ensure 1 (Staff I) of 3 Staff reviewed for employee training received 6 hours of initial medication assistance training as required. Staff I received 4 hours of initial training. Medication Training changed from 4 hours to 6 hours and required a 2 hour annual up-date beginning in May 2018. The findings included: Review of the Staff Roster submitted by the	A 084			

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A 084	Continued From page 10 fac ty revealed Staff I was a Medication Technician. Review of Staff I's employee record revealed 2 certificates for medication assistance training. On 2/21/19, Staff I completed 4 hours of training. On 7/17/25, Staff I completed 2 hours of renewal training. Staff I did not complete the required 6 hour course and failed to maintain documentation of the 2 hour annual up-dates. On 3/26/26 at 5:19 p.m., during an interview, the Administrator said she did not realize Staff I had completed 4 hours of initial training and was not qualified to assist with medications. Class III	A 084			

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ZZ814 SS=D	435.12(b-d), FS Background Screening Clearinghouse 435.12 Care Provider Background Screening Clearinghouse.- (2)(b) Until such time as the fingerprints are enrolled in the national retained print arrest notification program at the Federal Bureau of Investigation: 1. A person with a break in service of more than 90 days from a position that requires screening by a specified agency must submit to a national screening if the person returns to a position that requires screening by a specified agency. 2. Effective January 1, 2026, or a later date as determined by the Agency for Health Care Administration, for the participation of qualified entities in the clearinghouse under s. 435.12, a person with a break in service of more than 90 days from a position for which screening is conducted by a qualified entity participating in the clearinghouse must submit to a national screening if the person returns to a position for which screening is conducted by a qualified entity. (c) An employer of persons subject to screening or a qualified entity participating in the clearinghouse must register with the clearinghouse and maintain the employment or affiliation status of all persons included in the clearinghouse. 1. Before January 1, 2024, initial status and any changes in status must be reported within 10 business days after a person receives his or her initial status or after a change in the person's status has been made. 2. Effective January 1, 2024, initial status and any changes in status must be reported within 5 business days after a person receives his or her initial status or after a change in the person's status has been made.	ZZ814			

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ZZ814	Continued From page 1 (d) An employer or a qualified entity participating in the clearinghouse must register with and initiate all criminal history checks through the clearinghouse before referring an employee or potential employee or a person with a current or potential affiliation with a qualified entity for electronic fingerprint submission to the Department of Law Enforcement. The registration must include the person's full first name, middle initial, and last name; social security number; date of birth; mailing address; sex, and race. Individuals, persons, applicants, and controlling interests that cannot legally obtain a social security number must provide an individual taxpayer identification number. This Statute or Rule is not met as evidenced by: Based on interview, and record review, the facility failed to add to the Agency Clearinghouse Background Screening Roster within 5 business days one staff (the Administrator) of three staff reviewed for employee records. The findings included: Review of the Agency Clearinghouse revealed a permanent hire date for the Administrator of 10/20/25. The Roster showed the facility did not add the Administrator until 3/12/26. On 3/26/25 at 5:16 p.m., during an interview, the Human Resources Director (HRD) said she failed to add the administrator as required. Class III	ZZ814		