

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964870	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED
NAME OF PROVIDER OR SUPPLIER SRI AT HEALTHPARK		STREET ADDRESS, CITY, STATE, ZIP CODE 9461 HEALTHPARK CIRCLE FORT MYERS, FL 33908		
(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)	
A 000	Initial Comments An Extended Congregate Care (ECC) survey was conducted on _____ at SRI at Healthpark, an Assisted Living Facility (ALF). The following is a description of non-compliance:	A 000		
AE203	58A-5.030(4) FAC ECC - Staffing Requirements (4) STAFFING REQUIREMENTS. Each extended congregate care program shall: (a) Specify a staff member to serve as the extended congregate care supervisor if the administrator does not perform this function. If the administrator supervises more than one facility, he/she shall appoint a separate ECC supervisor for each facility holding an extended congregate care license. 1. The extended congregate care supervisor shall be responsible for the general supervision of the day-to-day management of an ECC program and ECC resident service planning. 2. The administrator of a facility with an extended congregate care license and the ECC supervisor, if separate from the administrator, must have a minimum of two years of managerial, nursing, social work, therapeutic recreation, or counseling experience in a residential, long term care, or acute care setting or agency serving elderly or _____ persons. A baccalaureate degree may be substituted for one year of the required experience. A nursing home administrator licensed under Chapter 468, F.S., shall be considered qualified under this paragraph. (b) Provide, as staff or by contract, the services of a nurse who shall be available to provide nursing services as needed by ECC residents, participate in the development of resident service plans, and perform monthly nursing assessments. (c) Provide enough qualified staff to meet the	AE203		

AHCA Form 3020-0001

TITLE

(X6) DATE

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

STATE FORM

6899

4PPX11

If continuation sheet 1 of 5

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AE203	Continued From page 1 needs of ECC residents in accordance with Rule 58A 5.019, F.A.C., and the amount and type of services established in each resident's service plan. (d) Regardless of the number of ECC residents, awake staff shall be provided to meet resident scheduled and unscheduled night needs. (e) In accordance with agency procedures established in Rule 58A-5.019, F.A.C., the agency shall require facilities to immediately provide additional or more qualified staff, when the agency determines that service plans are not being followed or that residents' needs are not being met because of the lack of sufficient or adequately trained staff. (f) Ensure and document that staff receive extended congregate care training as required under Rule 58A 5.0191, F.A.C. This Statute or Rule is not met as evidenced by: Based on observation, resident record review and staff interviews, the facility failed to ensure Extended Congregate Care (ECC) services was being provided by a licensed staff for 1 (Resident #3) of 3 records reviewed. The findings include: A review of Resident #3's record showed she is receiving ECC services daily. Staff is to put a brace on her left foot every morning. A review of the documentation shows a licensed nurse puts the brace on in the morning and takes it off in the evening. Observation on _____ at 11:45 a.m., showed Resident #3 wearing her brace on the left foot.	AE203			

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AE203	Continued From page 2 An interview was conducted with Staff E, a resident aid, on _____ at 11:45 a.m. She stated when she comes in the morning the brace is usually on Resident #3. However, there are times when the brace is not on her foot. She will take the brace and put it on Resident #3. An interview was conducted with the Licensed Practitioner Nurse (LPN) at 11:50 a.m. She stated she will put the brace on Resident #3 in the morning. Nurses are the only staff to provide this service for Resident #3. Resident _____ (RAs) are not allowed to put the brace on Resident #3 and she will mention this to Staff E. An interview was conducted with Staff B (director of residential services) at 1:50 p.m. on _____. He stated no RAs are to do ECC services and he will remind them all. Class III	AE203	
AE210:	58A-5.0191(7) FAC ECC - Training Staff Training Requirements and Competency Test. (7) EXTENDED CONGREGATE CARE TRAINING. (a) The administrator and extended congregate care supervisor, if different from the administrator, must complete core training and 4 hours of initial training in extended congregate care prior to the facility's receiving its extended congregate care license or within 3 months of beginning employment in the 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 _____, 1998, shall	AE210	

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AE210 Continued From page 3

not be required to take the assisted living facility core training competency test.

(b) The administrator and the extended congregate care 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 _____'s _____ or related _____.

(c) All direct care staff providing care to residents in an extended congregate care 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 extended congregate care concepts and requirements, including statutory and rule requirements, and delivery of personal care and supportive services in an extended congregate care facility.

This Statute or Rule is not met as evidenced by:
Based on personnel record review and staff interviews, the facility did not ensure 7 (Staff A, B, C, D, E, F and G) of 7 personnel records reviewed are properly trained in Extended Congregate Care (ECC) requirements.

The findings include:

1. A review of Staff A and B showed they were hired on _____ and _____ respectively. There was no documentation showing they had ECC training.
An interview was conducted with Staff B at 10:30 a.m. on _____. He stated he is the Director of _____.

AE210

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AE210	Continued From page 4 Resident Services and is in charge of ECC when Staff C is not available. He stated he has not received the ECC training yet. 2. Interview with Staff B at 10:30 a.m., revealed Staff C is the Registered Nurse (RN) consultant and oversees the ECC services at this facility. A review of her ECC training showed she had this training on There was no documentation of continuing education of ECC. 3. A review of Staff D, E, and F personnel records showed Staff D, E, and F had 1 hour training in ECC and the requirement is to have 2 hours training in ECC. 4. A review of Staff G's personnel record showed there was no documentation she had training in ECC. An interview was conducted with Staff A at 2:15 p.m. She stated Staff G's date of hire was Class III	AE210	



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
SRI At Healthpark
9461 Healthpark Circle
Fort Myers, FL 33908

Dear Administrator:

This letter reports the findings of an Extended Congregate Care (ECC) survey that was conducted on 2013 by a representative of this office.

Attached is the provider's copy of the State (3020) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after , 2013 to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call this office at (239) 335-1315.

Sincerely,

Harold D. Williams
Field Office Manager

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Enclosure: State Form

