

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

AL11966600

(X2) MULTIPLE CONSTRUCTION

A. BUILDING: _____

B. WING: _____

(X3) DATE SURVEY
COMPLETED

NAME OF PROVIDER OR SUPPLIER

TRANSFORMATION ASSISTED LIVING

STREET ADDRESS, CITY, STATE, ZIP CODE

1963 CONTINENTAL BLVD
ORLANDO, FL 32808

(X4) ID
PREFIX
TAG

SUMMARY STATEMENT OF DEFICIENCIES
(EACH DEFICIENCY MUST BE PRECEDED BY FULL
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PROVIDER'S PLAN OF CORRECTION
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(X5)
COMPLETE
DATE

A 000

Initial Comments

3/25/2013 Limited Nursing Services (LNS)
monitoring conducted.

The facility had deficiencies found during the visit.

A 030

58A-5.0182(6) FAC; 429.28 FS Resident Care -
Rights & Facility Procedures

(6) RESIDENT RIGHTS AND FACILITY
PROCEDURES.

(a) A copy of the Resident Bill of Rights as
described in Section 429.28, F.S., or a summary
provided by the Long-Term Care Ombudsman
Council shall be posted in full view in a freely
accessible resident area, and included in the
admission package provided pursuant to Rule
58A-5.0181, F.A.C.

(b) In accordance with Section 429.28, F.S., the
facility shall have a written grievance procedure
for receiving and responding to resident
complaints, and for residents to recommend
changes to facility policies and procedures. The
facility must be able to demonstrate that such
procedure is implemented upon receipt of a
complaint.

(c) The address and telephone number for
lodging complaints against a facility or facility staff
shall be posted in full view in a common area
accessible to all residents. The addresses and
telephone numbers are: the District Long-Term
Care Ombudsman Council, 1(888)831-0404; the
Advocacy Center for Persons with
1(800)342-0823; the Florida Local Advocacy
Council, 1(800)342-0825; and the Agency
Consumer Hotline 1(888)419-3456.

(d) The statewide toll-free telephone number of
the Florida _____ Hotline " 1(800)96
1(800)962-2873 " shall be posted in full view in a
common area accessible to all residents.

A 000

A 030

AHCA Form 3020-0001

TITLE

(X6) DATE

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

STATE FORM

8999

W45E11

If continuation sheet 1 of 11

Agency for Health Care Administration

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A 030	Continued From page 1 (e) The facility shall have a written statement of its house rules and procedures which shall be included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C. The rules and procedures shall address the facility's policies with respect to such issues, for example, as resident responsibilities, the facility's _____ and tobacco policy, medication storage, the delivery of services to residents by third party providers, resident elopement, and other administrative and housekeeping practices, schedules, and requirements. (f) Residents may not be required to perform any work in the facility without compensation, except that facility rules or the facility contract may include a requirement that residents be responsible for cleaning their own sleeping areas or apartments. If a resident is employed by the facility, the resident shall be compensated, at a minimum, at an hourly wage consistent with the federal minimum wage law. (g) The facility shall provide residents with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication, pursuant to Section 429.28(1)(d), F.S. The facility shall not prohibit unidentified telephone calls to residents. For facilities with a licensed capacity of 17 or more residents in which residents do not have private telephones, there shall be, at a minimum, an accessible telephone on each floor of each building where residents reside. (h) Pursuant to Section 429.41, F.S., the use of physical _____ shall be limited to half-bed rails, and only upon the written order of the resident's physician, who shall review the order biannually, and the consent of the resident or the resident's representative. Any device, including half-bed rails, which the resident chooses to use and can remove or avoid without assistance shall	A 030			

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A 030

Continued From page 2
not be considered a physical

429.28 Resident bill of rights. -
(1) No resident of a facility shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law, the Constitution of the State of Florida, or the Constitution of the United States as a resident of a facility. Every resident of a facility shall have the right to:
(a) Live in a safe and decent living environment, free from _____ and neglect.
(b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy.
(c) Retain and use his or her own clothes and other personal property in his or her immediate living quarters, so as to maintain individuality and personal dignity, except when the facility can demonstrate that such would be unsafe, impractical, or an infringement upon the rights of other residents.
(d) Unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum. Upon request, the facility shall make provisions to extend visiting hours for caregivers and out-of-town guests, and in other similar situations.
(e) Freedom to participate in and benefit from community services and activities and to achieve the highest possible level of independence, autonomy, and interaction within the community.
(f) Manage his or her financial affairs unless the resident or, if applicable, the resident's representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as provided in s. 429.27.

A 030

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A 030	Continued From page 3 (g) Share a _____ his or her spouse if both are residents of the facility. (h) Reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals except when prevented by inclement weather. (i) Exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, nor any attendance at religious services, shall be imposed upon any resident. (j) Access to adequate and appropriate health care consistent with established and recognized standards within the community. (k) At least 45 days' notice of relocation or termination of residency from the facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally _____, the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for relocation shall be set forth in writing. In order for a facility to terminate the residency of an individual without notice as provided herein, the facility shall show good cause in a court of competent jurisdiction. (l) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without _____ interference, coercion, discrimination, or reprisal. Each facility shall establish a grievance procedure to facilitate the residents' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or	A 030			

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A 030 Continued From page 4
special interest groups.

This Statute or Rule is not met as evidenced by:
Based on observations and interviews the facility
failed to ensure it complied with the Residents
Bill of Rights to be treated with consideration and
respect and with due recognition of personal
dignity, individuality, and the need for privacy.
Findings:

Observations at approximately 2 PM noted a
hand written sign posted on the wall by the dining
area, where residents ate their meals that
indicated "All residents must be bathed 3 times a
week or more if _____ of stool or _____
[Name] Monday, Wednesday & Saturday. [Name]
Tuesday, Thursday & Saturday and [Name]
Sunday, Tuesday and Friday.
The administrator stated over the telephone at
approximately 2:30 PM that she placed the sign
as a reminder to staff.
Class III

A 030

A 081 58A-5.0191(2) FAC Training - Staff In-Service

(2) 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. Documentation of
compliance with the staff training requirements of

A 081

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A 081

Continued From page 5

29 CFR 1910.1030, relating to _____ borne
_____ 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 major incidents.
2. Reporting adverse incidents.
3. 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

(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

A 081

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A 081	Continued From page 6 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 personnel record review and interview the facility failed to ensure 1 of 2 staff (A) received the mandated in-service training regarding safe food handling practices. Findings: During the facility entrance at approximately 1:15 PM, staff A stated she was alone with the residents, she called the administrator. Staff B arrived shortly, she stated it was her day off, but she came to help with the survey. Review of the 2013 staff schedule revealed the staff worked 24 hour shifts. Personnel record review for staff A, hired 2012, revealed no evidence to confirm she received an in-service training regarding safe food handling practices, nor was there evidence she attended the Assisted Living Core training, therefore exempt from the in-service. The administrator stated over the telephone at approximately 2:30 PM that she will ensure all the trainings were completed. Class III	A 081			
A 082	58A-5.0191(3) FAC Training - (3) Pursuant to Section 381.0035, F.S., all facility employees, with the exception of employees subject to the	A 082			

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A 082	Continued From page 7 requirements of Section 456.033, F.S., must complete a one-time education course on ... and ... including the topics prescribed in the Section 381.0035, F.S. New facility staff must obtain the training within 30 days of employment. Documentation of compliance must be maintained in accordance with subsection (12) of this rule. This Statute or Rule is not met as evidenced by: Based on personnel record review and interview the facility failed to ensure that 1 of 2 sampled staff (A) obtained a one-time training on Findings: Personnel record review at approximately 1:30 PM revealed staff B was hired in ... 2012. Continued personnel record review revealed no evidence to confirm that staff A received an in-service training regarding The administrator stated over the telephone at approximately 2:30 PM that she will ensure all the trainings were completed. Class III	A 082		
A 083	58A-5.0191(4) FAC Training - First Aid and (4) 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 of attendance at First Aid or ... course offered by an accredited college, university or vocational school; a licensed hospital; the American Red Cross, American ... Association, or National Safety Council; or	A 083		

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A 083	Continued From page 8 a provider approved by the Department of Health, shall satisfy 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 Part III of Chapter 401, F.S., shall be considered as having met the training requirements for both First Aid and . This Statute or Rule is not met as evidenced by: Based on observations, personnel record review and interviews the facility failed to ensure that staff members who had completed courses in First Aid and . and held a currently valid card documenting completion of such courses was present in the facility at all times when residents were present. Findings: During the facility entrance at approximately 1:15 PM, staff A stated she was alone with the residents, she called the administrator. There were 5 residents in the facility. Staff B arrived shortly, she stated it was her day off, but she came to help with the survey. Review of the . 2013 staff schedule revealed the staff worked 24 hour shifts, and therefore were the sole caregiver during those times. Personnel record review for staff A, revealed no evidence to confirm she had First Aid training, the certification was issued on ., was valid for 2 years, therefore expired . Personnel record review for staff B, revealed First Aid training issued . and was valid for 2 years, therefore expired on ., the . certification was issued on ., was valid for 2 years, and therefore expired . Both staff looked at their . /First Aid cards and	A 083		

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A 083	Continued From page 9 validated their expiration dates. The administrator, a Registered Nurse, stated over the telephone at approximately 2:30 PM that she would cover for the staff and sign them up for a class. Class III	A 083			
A 161	58A-5.024(2) FAC Records - Staff (2) STAFF RECORDS. (a) Personnel records for each staff member shall contain, at a minimum, a copy of the original employment application with references furnished and verification of freedom from communicable including In addition, records shall contain the following, as applicable: 1. Documentation of compliance with all staff training required by Rule 58A-5.0191, F.A.C.; 2. Copies of all licenses or certifications for all staff providing services which require licensing or certification; 3. Documentation of compliance with level 1 background screening for all staff subject to screening requirements as required under Rule 58A-5.019, F.A.C.; 4. A copy of the job description given to each staff member pursuant to Rule 58A-5.019, F.A.C., for facilities with a licensed capacity of seventeen (17) or more residents; and 5. Documentation of facility direct care staff and administrator participation in resident elopement drills pursuant to paragraph 58A-5.0182(8)(c), F.A.C. (b) The facility shall not be required to maintain personnel records for staff provided by a licensed staffing agency or staff employed by a business entity contracting to provide direct or indirect services to residents and the facility. However, the facility must maintain a copy of the contract between the facility and the staffing agency or	A 161			

Agency for Health Care Administration

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STREET ADDRESS, CITY, STATE, ZIP CODE

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A 161	Continued From page 10 contractor as described in Rule 58A-5.019, F.A.C. (c) The facility shall maintain the facility 's written work schedules and staff time sheets as required under Rule 58A-5.019, F.A.C., for the last 6 months. This Statute or Rule is not met as evidenced by: Based on personnel record review and interview the facility failed to ensure personnel records for 2 of 2 sampled staff (A and B) contained a completed level I background screening that included all required components. Findings: Individual personnel record review for staff A and B at approximately 1:30 PM revealed that the personnel record did not contain an affidavit of compliance (or a similar document) with background screening requirements. The staff stated at approximately 2 PM to leave a list of items not in their personnel records, and she would ensure the administrator received as she was at work. The administrator stated over the telephone at approximately 2:30 PM that she will ensure all the trainings were completed. Class	A 161		



RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

2013

Administrator
Transformation Assisted Living
1963 Continental Blvd
Orlando, FL 32808

Dear Administrator:

Re: LNS monitoring

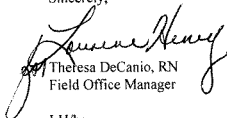
This letter reports the findings of a state licensure survey that was conducted on _____, 2013 by representative(s) of this office.

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(s). Should you have any questions please call Lorraine Henry at _____.

Sincerely,



Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
<http://ahca.myflorida.com>



Orlando Field Office
400 W. Robinson St., Suite S-309
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Phone (407) 420-2502; Fax (407) 245-0998