

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964952	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/18/2024
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NAME OF PROVIDER OR SUPPLIER ARDEN COURTS OF SARASOTA	STREET ADDRESS, CITY, STATE, ZIP CODE 5509 SWIFT ROAD SARASOTA, FL 34231
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A 000	<p>Initial Comments</p> <p>An unannounced relicensure, limited nursing services, emergency power plan monitoring, health facility reporting system, visitation form and complaint survey for #2023010986 and #2023012296 was conducted on 11/18/24 at Arden Courts of Sarasota, an assisted living facility in Sarasota, Florida.</p> <p>Complaint 2023010986 had 4 allegations, one of which was substantiated. Complaint 2023012296 was not substantiated.</p> <p>The following is a description of the deficiencies.</p>	A 000		
A 078 SS=D	<p>59A-36.010(2) FAC Staffing Standards - Staff (2) STAFF.</p> <p>(a) Within 30 days after beginning employment, newly hired staff must submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable disease. The examination performed by the health care provider must have been conducted no earlier than 6 months before submission of the statement. Newly hired staff does not include an employee transferring without a break in service from one facility to another when the facility is under the same management or ownership.</p> <p>1. Evidence of a negative tube examination must be documented on an annual basis. Documentation provided by the Florida Department of Health or a licensed health care provider certifying that there is a shortage of testing materials satisfies the annual examination requirement. An individual with a positive tuberculin test must submit a health care provider's statement that the</p>	A 078		

AHCA Form 3020-0001 LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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A 078	<p>Continued From page 1</p> <p>individual does not constitute a risk of</p> <p>2. If any staff member has, or is suspected of having, a communicable disease, each individual must be immediately removed from duties until a written statement is submitted from a health care provider indicating that the individual does not constitute a risk of transmitting a communicable disease.</p> <p>(b) Staff must be qualified to perform their assigned duties consistent with their level of education, training, preparation, and experience. Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff must exercise their responsibilities, consistent with their qualifications, to observe residents, to document observations on the appropriate resident's record, and to report the observations to the resident's health care provider in accordance with this rule chapter.</p> <p>(c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C.</p> <p>(d) An assisted living facility contract to provide services to residents must ensure that individuals providing services are qualified to perform their assigned duties in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor must specifically describe the services the staffing agency or contractor will provide to residents.</p> <p>(e) For facilities with a licensed capacity of 17 or more residents, the facility must:</p> <ol style="list-style-type: none"> 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and, 2. Maintain time sheets for all staff. <p>(f) Level 2 background screening must be conducted for staff, including staff contractors.</p>	A 078		
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A 078	<p>Continued From page 2</p> <p>the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S.</p> <p>This Statute or Rule is not met as evidenced by: Based on record review, and interview, the facility failed to ensure 4 (Administrator, Staff A, Staff C and Staff D) of 4 employees whose records were reviewed included written documentation from a health care provider stating that they are free from communicable disease within 6 months prior to hire or within 30 days of hire, in addition the facility failed to ensure 2 (Administrator and Staff A) of 4 employees whose records were reviewed included written documentation of an annual negative tuberculin skin examination (TB).</p> <p>The findings included:</p> <p>A review of the employee's record conducted on _____ revealed the Administrator was hired on _____ Staff A on 09/____ Staff C on _____, and Staff D on 07/____. There was no statement from a health care provider indicating the above employees were free from communicable disease in each file.</p> <p>A review of employee's record conducted on _____ revealed that the Administrator and Staff A did not have written documentation of an annual negative tuberculin skin examination in each file.</p> <p>An interview was conducted at 11:30 a.m. on _____. The Memory Care Advisor confirmed there was no written statement from a health care provider that showed the Administrator, Staff A, Staff C, and Staff D was free from communicable disease. Also, there was no annual negative tuberculin skin examination for the Administrator, or Staff A.</p>	A 078		
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A 078	Continued From page 3 Class III	A 078		
A 081 SS=D	<p>429.52(1 & 7) FS; 59A-36.011(2) , FAC Training - Staff In-Service</p> <p>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.</p> <p>(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).</p> <p>(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).</p> <p>(7) Facility staff shall participate in inservice training relevant to their job duties as specified by agency rule. Topics covered during the preservice orientation are not required to be repeated during</p>	A 081		

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A 081	<p>Continued From page 4</p> <p>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.</p> <p>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 infect), including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use its</p>	A 081		
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A 081	<p>Continued From page 5</p> <p>control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to blood , may be used to meet this requirement.</p> <p>(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:</p> <ol style="list-style-type: none"> 1. Reporting adverse incidents. 2. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. <p>(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:</p> <ol style="list-style-type: none"> 1. Resident rights in an assisted living facility. 2. Recognizing and reporting resident abuse, neglect, and ex facility must use its prevention policies and procedures when offering this training. <p>(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:</p> <ol style="list-style-type: none"> 1. Resident behavior and needs. 2. Providing assistance with the activities of daily living. <p>(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.</p> <p>(f) All facility staff shall receive in-service training</p>	A 081		
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A 081 Continued From page 6
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.

A 081

This Statute or Rule is not met as evidenced by: Based on record review, and interview, the Facility failed to provide direct care staff with the required in-service training within thirty-days for the following trainings: 1 hour for Reporting Major Incidents Reporting Adverse Incidents; 1 hour of Resident Rights and Recognizing/Reporting /Neglect training; 1 hour for Nutritional and Safe Food Handling; for 2 (Staff C and D) of 4 sampled employees. Also, 2 hours of Preservice Orientation training before interacting with residents was not completed. In addition, 3 hours of Activity Daily Living (ADL) and 1 hour of Control Training prior to providing direct care for 1 (Staff C) of 4 sampled staff was not completed.

The findings included:

An employee record review for Staff C and Staff D conducted on 11 revealed there was several mandatory training courses were missing in Staff C's and D's record. Staff C was hired on and Staff D was hired on 07/2 2

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A 081 Continued From page 7

During interview on 11/18/2024 at 11:30 a.m., the Memory Care Advisor agreed that the trainings should have been in the employee's record and completed within 30 days of hire.

Class III

A 082 59A-36.011(4) FAC Training - HIV SS=D

(4) Facility failed to ensure that newly hired employees had the required one-time education course on HIV and Aids, including the topics prescribed in the section 381.0035, F.S. Pursuant to section 381.0035, F.S., all facility employees, with the exception of employees subject to the requirements of section 456.033, F.S., must complete a one-time education course on HIV and Aids, 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 record review, and interview, the Facility failed to ensure that newly hired employees had the required one-time education course on HIV and Aids, including the topics prescribed in the section 381.0035, F.S. Pursuant to section 381.0035, F.S., all facility employees, with the exception of employees subject to the requirements of section 456.033, F.S., must complete a one-time education course on HIV and Aids, 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.

(1) Facility failed to ensure that newly hired employees had the required one-time education course on HIV and Aids, including the topics prescribed in the section 381.0035, F.S. Pursuant to section 381.0035, F.S., all facility employees, with the exception of employees subject to the requirements of section 456.033, F.S., must complete a one-time education course on HIV and Aids, 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.

The findings included:

An employee record review for Staff C conducted on 11/18/2024 revealed a date of hire of 05/02/2024 and no evidence of training on HIV/Aids.

A 081

A 082

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A 082 Continued From page 8

During an interview on 11/ 11:30 a.m., the Memory Care Advisor agreed that Staff C did not have evidence in their employee record that they had completed the required training on HIV/A

Class III

A 090 59A-36.011(11) FAC Training - Do :
SS=D

(11) C T RS
TRAINING.

- (a) Currently employed facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policies and procedures regarding Do
- (b) Newly hired facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policy and procedures regarding D s within 30 days after employment.
- (c) Training shall consist of the information included in rule 59A-36.009, F.A.C.

This Statute or Rule is not met as evidenced by: Based on record review, and interview, the Facility failed to ensure employees had proof of required training in the facility's policies and procedures regarding do (I) for 2 (Staff C and D) of 4 sampled employees.

The findings included:

An employee record review for Staff C and Staff

A 082

A 090

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ARDEN COURTS OF SARASOTA

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A 090	<p>Continued From page 9</p> <p>D conducted on 11/18/2024 revealed that Staff C's and Staff D's record did not include written documentation of 1-hour training in Do No Harm policy and procedure within 30 days of hire. Staff C was hired on 07/22/2024 and Staff D was hired on 07/22/2024.</p> <p>During an interview on 11/18/2024 at 11:30 a.m., the Memory Care Advisor agreed that Staff C's and Staff D's training was not in their records.</p> <p>Class III</p>	A 090		
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CZ875 SS=D	<p>430.5025(4 &) / ;</p> <p>Training</p> <p>(4) Employees of covered providers must complete the following training for and related forms of :</p> <p>(a) Upon beginning employment, each employee must receive basic written information about interacting with persons who have or related forms of .</p> <p>(b) Within 30 days after beginning employment, each employee who provides personal care to or has regular contact with participants, patients, or residents must complete a 1-hour training program provided by the department.</p> <p>1. The department shall provide training that is available online at no cost. The 1-hour training program shall contain information on understanding the basics about the most common forms of , how to identify the signs and symptoms of , and skills for communicating and interacting with persons with 's or related forms of . A record of the completion of the training program must be made available to the covered provider which identifies the training curricula, the name of the employee, and the date of completion.</p> <p>2. A covered provider must maintain a record of the employee's completion of the training program and, upon written request of the employee, provide the employee with a copy of the record of completion consistent with the employer's written policies.</p> <p>3. An employee who has completed the training required in this subsection is not required to repeat the program upon changing employment to a different covered provider.</p> <p>(c) Within 7 months after beginning employment for a home health agency, nurse registry, or companion or homemaker service provider, each</p>	CZ875		
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CZ875	<p>Continued From page 1</p> <p>employee who provides personal care must complete 2 hours of training in addition to the training required in paragraphs (a) and (b). The additional training must include, but is not limited to, behavior management, promoting the person's independence in activities of daily living, and skills in working with families and caregivers. (d) Within 7 months after beginning employment for a nursing home, an assisted living facility, an adult family-care home, or an adult day care center, each employee who provides personal care must complete 3 hours of training in addition to the training required in paragraphs (a) and (b). The additional training must include, but is not limited to, behavior management, promoting the person's independence in activities of daily living, skills in working with families and caregivers, group and individual activities, maintaining an appropriate environment, and ethical issues. (e) For an assisted living facility, adult family-care home, or adult day care center that advertises and provides, or is designated to provide, specialized care for persons with _____, or related forms of _____, in addition to the training specified in paragraphs (a) and (b), employees must receive the following training:</p> <ol style="list-style-type: none"> 1. Within 3 months after beginning employment, each employee who provides personal care to or has regular contact with the residents or participants must complete the additional 3 hours of training as provided in paragraph (d). 2. Within 6 months after beginning employment, each employee who provides personal care must complete an additional 4 hours of _____-specific training. Such training must include, but is not limited to, understanding _____ and related forms of _____, the stages of _____, communication strategies, medical information, 	CZ875		
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CZ875	<p>Continued From page 2</p> <p>and stress management.</p> <p>3. Thereafter, each employee who provides personal care must participate in at least 4 hours of continuing education each calendar year through contact hours, on-the-job training, or electronic learning . . . For this subparagraph, the term "on-the-job training" means a form of direct coaching in which a facility administrator or his or her designee instructs an employee who provides personal care with guidance, support, or -on experience to help develop and refine the employee's skills for caring for a person with or a related form of . The continuing education must cover at least one of the topics included in the -specific training in which the employee has not received previous training in the previous calendar year. The continuing education may be fulfilled and documented in a minimum of one quarter-hour increments through on-the-job training of the employee by a facility administrator or his or her designee or by an electronic learning . . . chosen by the facility administrator. On-the-job training may not account for more than 2 hours of continuing education each calendar year.</p> <p>(f)1. An employee provided, assigned, or referred by a health care services pool must complete the training required in paragraph (c), paragraph (d), or paragraph (e) that is applicable to the covered provider and the position in which the employee will be working. The documentation verifying the completed training and continuing education of the employee, if applicable, must be provided to the covered provider upon request.</p> <p>2. A health care services pool must verify and maintain documentation as required under s. 400.980(5) before providing, assigning, or referring an employee to a covered provider.</p>	CZ875		
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Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964952	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/18/2024
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NAME OF PROVIDER OR SUPPLIER ARDEN COURTS OF SARASOTA	STREET ADDRESS, CITY, STATE, ZIP CODE 5509 SWIFT ROAD SARASOTA, FL 34231
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(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
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CZ875	<p>Continued From page 3</p> <p>(7) For a certified nursing assistant as defined in s. 464.201, training hours completed as required under this section may count toward the total hours of training required to maintain certification as a nursing assistant.</p> <p>(8) For a health care practitioner as defined in s. 456.001, training hours completed as required under this section may count toward the total hours of continuing education required by that practitioner's licensing board.</p> <p>(9) Each person employed, _____, or referred to provide services before _____, must complete the training required in this section before _____. Proof of completion of equivalent training completed before _____, shall substitute for the training required in subsection (4). Each person employed, _____, or referred to provide services on or after _____, may complete training using approved curriculum under paragraph (5)(d) until the effective date of the rules adopted by the department under subsection (6).</p> <p>This Statute or Rule is not met as evidenced by: Based on record review, and interview, the facility failed to provide the required 1-hour training for the _____ and Related (ARDR) for 2 (Staff C and Staff D) of the 4 sampled employees whose date of hire was after _____. Also, the additional 3-hours of ARDR training was not completed within the first 3 months.</p> <p>The findings included:</p> <p>An employee record review for Staff C and Staff D conducted on _____ revealed that Staff C and Staff D did not take the required 1-hour training for _____ and Related</p>	CZ875		
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Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964952	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/18/2024
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NAME OF PROVIDER OR SUPPLIER ARDEN COURTS OF SARASOTA	STREET ADDRESS, CITY, STATE, ZIP CODE 5509 SWIFT ROAD SARASOTA, FL 34231
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CZ875	<p>Continued From page 4</p> <p>, provided by Elder Affairs. In addition, 3-hours of additional training within 3 months was not completed. Staff C was hired on _____ and Staff D was hired on _____.</p> <p>During an interview on _____ at 11:30 a.m., the Memory Care Advisor agreed that Staff C and Staff D did not complete the required _____ and Related _____ training.</p> <p>Class III</p>	CZ875		
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