



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

March 14, 2016

Dear Administrators:

The Agency for Health Care Administration is reminding providers of their responsibilities to ensure ALL residents are appropriate for admission and continued residency per Rule 58A-5.0181, F.A.C.

Residents in Florida's Assisted Living Facilities have the right to live in a safe and decent environment, free from abuse and neglect. It is ultimately the provider's responsibility to ensure these rights.

Residents must be appropriate and the ALF must be able to meet resident needs:

- It is the facility administrator's responsibility to determine a resident is appropriate for admission and remains appropriate for continued residency during the resident's stay. The facility is required to have an admission policy and the facility must be prepared and able to provide or arrange for services appropriate or necessary to meet resident needs.
- The administrator's responsibility to assure that the facility can provide or arrange for services necessary and appropriate to meet resident needs is an ongoing obligation for continued residency and this responsibility must be met without regard to the source of the resident's referral for services, including mental health providers or the criminal justice system.
- The facility administrator must ensure that any resident admitted is appropriate for the level of supervision the assisted living facility can provide. Under 58A-5.0182 FAC, the facility must provide personal supervision as appropriate for each resident admitted to the facility.
- Residents may not be admitted if there are any indications the resident is a danger to self or others or requires 24-hour licensed professional mental health treatment.
- Providers are required to report any significant changes, such as a sudden or major shift in behavior or mood, to the resident's health care provider and other appropriate party such as the resident's family, guardian, health care surrogate, or case manager.
- The facility administrator should contact the resident's Medicaid case managers or health plan to report behavioral health services concerns and needs.
- Providers are required to obtain a completed Health Assessment (AHCA form 1823) which includes a statement on the day of the examination that, in the opinion of the examining health care provider, the resident's needs can be met in an assisted living facility. A new Health Assessment must be obtained every three (3) years or after a resident experiences a significant change. Rule 58A-5.0181(4), F.A.C.



- Under 429.075 FS, if a facility is admitting any individual who meets the definition of a mental health resident, the facility must obtain a limited mental health license and comply with the requirements of the license, including the requirements for additional staff training and a community support plan indicating how the limited mental health resident's needs will be met in the facility.

Staff must be qualified:

- All facilities, including those composed of apartments, must have enough qualified staff to provide resident supervision, and to provide or arrange for resident services in accordance with the residents' scheduled and unscheduled service needs, resident contracts, and resident care standards Rule 58A-5.019(3)(b), F.A.C. In addition, under statute and rule, minimum staff requirements include a Level II background screen indicating staff are eligible to work in the facility, documentation of being free of communicable disease and completion of trainings required for their duties. Staff who provide direct care to residents must receive in-service training on recognizing and reporting abuse, neglect, and exploitation. Staff assisting with self-administration of medication must also have the required training.
- It is critical that the facility administrator provide the necessary oversight to ensure the facility has qualified staff able to meet the needs of the residents of the facility. Failure of facilities to provide supervision necessary to meet the needs of residents, failure to honor resident rights and failure to ensure staff have required training and documentation of freedom from communicable disease have consistently been among the top ten deficiencies cited by the Agency in the last several years. Failure to honor resident rights was cited 357 times in calendar year 2015. 23 of those citations were at serious (Class I or Class II) level.
- As part of staff qualifications, the administrator must ensure staff have a Level II background screen indicating they are eligible to work in the facility. In the last five years, background screening violations have been cited over 900 times statewide. Under statute, a facility is to be fined \$500 by the Agency for each violation and may support an Agency decision to revoke licensure. Staff must also be added to the facility roster (employee list) in the Agency's Care Provider Background Screening Clearinghouse to assure the administrator will be notified of a change in staff background screening eligibility, such as a disqualifying arrest.

Should you have any questions, you may contact Anne Avery, at (850) 412-4505.

Sincerely,

Anne Avery, RN LNC
Assisted Living Unit Manager