Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11968716	A. BUILDING: _____ B. WING _____	08/26/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
INSPIRED LIVING AT PALM BAY	350 MALABAR RD SW PALM BAY, FL 32907

(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
CZ812 SS=C	408.803(5); 408.807 FS Change of Ownership 408.803 Definitions. -- As used in this part, the term: (5) "Change of ownership" means: (a) An event in which the licensee sells or otherwise transfers its ownership to a different individual or entity as evidenced by a change in federal employer identification number or taxpayer identification number; or (b) An event in which 51 percent or more of the ownership, shares, membership, or controlling interest of a licensee is in any manner transferred or otherwise assigned. This paragraph does not apply to a licensee that is publicly traded on a recognized stock exchange. A change solely in the management company or board of directors is not a change of ownership. 408.807 Change of ownership.-Whenever a change of ownership occurs: (1) The transferor shall notify the agency in writing at least 60 days before the date of the change of ownership. (2) The transferee shall make application to the agency for a license within the timeframes required in s. 408.806. (3) The transferor shall be responsible and liable for: (a) The lawful operation of the provider and the welfare of the clients served until the date the transferee is licensed by the agency. (b) Any and all penalties imposed against the transferor for violations occurring before the date of change of ownership. (4) Any restriction on licensure, including a conditional license existing at the time of a change of ownership, shall remain in effect until the agency determines that the grounds for the restriction are corrected. (5) The transferee shall maintain records of the	CZ812		

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CZ812	Continued From page 1 transferor as required in this part, authorizing statutes, and applicable rules, including: (a) All client records. (b) Inspection reports. (c) All records required to be maintained pursuant to s. 409.913, if applicable. This Statute or Rule is not met as evidenced by: Based on record review, observation and interviews, the facility failed to file the required Change of Ownership (CHOW) application within 60-days before the , change of ownership. Findings include: On at 1:00 PM, in arrival at the facility, it was observed by the Agency that the street sign had been changed from the name of the licensed facility to a new name. It was also observed by the Agency that the name on the building had been removed. On at 1:10 PM, in an interview with the administrator, the administrator stated when asked about the sign change that the facility had been officially sold and the signage is being adjusted to the new owners. On at 1:40 PM, in an interview with the administrator in the facility conference room, the room was filled with new uniforms. The administrator, when asked, stated this are the new uniforms for the facility staff, part of the facility sale. On , in a record review of the facility operating procedure regarding re-admission	CZ812		

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CZ812	Continued From page 2 assessment, the operating procedure was on paper work indicating the new ownership group. (photographic evidence obtained). On/23/2019 at 2:00 PM, in an e-mail interview with the Agency for Health Care Administration Licensing Unit, the Unit stated the CHOW application had been received on . On at 11:11 AM, in a telephone call to the facility, it was observed that the telephone is now being answered with the name of the new ownership group. On , in a record review of the current facility web site, the listing for the current facility has been deleted. On at 11:11 AM, in an interview with the Wellness Director, the Director confirmed that the facility officially changes on . Unclassified	CZ812		
CZ814 SS=C	435.12(2)(b-d), FS Background Screening Clearinghouse 435.12(2) Care Provider Background Screening Clearinghouse.- (b) Until such time as the , are enrolled in the national retained print notification program at the Federal Bureau of Investigation, an employee 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. (c) An employer of persons subject to screening	CZ814		

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CZ814	Continued From page 3 by a specified agency must register with the clearinghouse and maintain the employment status of all employees within the clearinghouse. Initial employment status and any changes in status must be reported within 10 business days. (d) An employer must register with and initiate all criminal history checks through the clearinghouse before referring an employee or potential employee for electronic , submission to the Department of Law Enforcement. The registration must include the employee's full first name, middle initial, and last name; social security number; date of birth; mailing address; ; 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 record review and interviews, the facility failed to ensure all employees are listed, as required, on the facility background-screening roster. Findings include: On at 1:10 PM, in an interview with the administrator, the administrator provided the name of the current Wellness Director stating that she was off today making an assessment. On at 11:11 AM, in an interview with the Wellness Director, the Wellness Director stated she has been employed at the facility since 2015. On , in a record review of the facility background-screening roster, the roster documented the Wellness Director had an	CZ814		

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CZ814	Continued From page 4 end-dated as a facility employee as of . . . . . , and not officially on the facility background-screening roster. Unclassified	CZ814		
A 000	Initial Comments An unannounced complaint investigation, 2019008099, was completed at Inspired Living of Palm Bay, Palm Bay, Florida, from to . The facility has deficient practice at the time of the complaint investigation.	A 000		