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
	AL11966872	A. BUILDING: _____ B. WING _____	R 09/28/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CHRISTEL CARE INC	806 14TH STREET WEST PALM BEACH, FL 33401

(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
{A 000}	Initial Comments An 3rd desk review revisit to the relicensure survey was conducted on . . . . . and an on-site revisit on for Christel Care Inc. The facility had uncorrected deficiencies identified at the time of the survey.	{A 000}		
{A 077} SS=D	429.176 FS; 429.52( ),59A-36.01(1) FAC Staffing Standards - Administrators 429.176 Notice of change of administrator.-If, during the period for which a license is issued, the owner changes administrators, the owner must notify the agency of the change within 10 days and provide documentation within 90 days that the new administrator has completed the applicable core educational requirements under s. 429.52. A facility may not be operated for more than 120 consecutive days without an administrator who has completed the core educational requirements. 429.52 (4) A new facility administrator must complete the required training and education, including the competency test, within 90 days after date of employment as an administrator. Failure to do so is a violation of this part and subjects the violator to an administrative fine as prescribed in s. 429.19. Administrators licensed in accordance with part II of chapter 468 are exempt from this requirement. Other licensed professionals may be exempted, as determined by the agency by rule. (5) Administrators are required to participate in continuing education for a minimum of 12 contact hours every 2 years. 59A-36.010 (1) ADMINISTRATORS. Every facility must be	{A 077}		

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{A 077}	Continued From page 1 under the supervision of an administrator who is responsible for the operation and maintenance of the facility including the management of all staff and the provision of appropriate care to all residents as required by chapters 408, part II, 429, part I, F.S., and rule chapter 59A-35, F.A.C., and this rule chapter. (a) An administrator must: 1. Be at least [illegible]; 2. If employed on or after [illegible], have, at a minimum, a high school diploma or G.E.D.; 3. Be in compliance with Level 2 background screening requirements pursuant to sections 408.809 and 429.174, F.S.; 4. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C., no later than 90 days after becoming employed as a facility administrator. Administrators who attended core training prior to [illegible], are not required to take the competency test unless specified elsewhere in this rule; and, 5. Satisfy the continuing education requirements pursuant to rule 59A-36.011, F.A.C. Administrators who are not in compliance with these requirements must retake the core training and core competency test requirements in effect on the date the non-compliance is discovered by the agency or the department. (b) In the event of extenuating circumstances, such as the [illegible] of a facility administrator, the agency may permit an individual who otherwise has not satisfied the training requirements of subparagraph (1)(a)4. of this rule, to temporarily serve as the facility administrator for a period not to exceed 90 days. During the 90 day period, the individual temporarily serving as facility administrator must:	{A 077}		

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{A 077}	Continued From page 2 1. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C.; and, 2. Complete all additional training requirements if the facility maintains licensure as an extended congregate care or limited mental health facility. (c) Administrators may supervise a maximum of either three assisted living facilities or a group of facilities on a single campus providing housing and health care Administrators who supervise more than one facility must appoint in writing a separate manager for each facility. However, an administrator supervising a maximum of three assisted living facilities, each licensed for 16 or fewer beds and all within a 15 mile of each other, is only required to appoint two managers to assist in the operation and maintenance of those facilities. (d) An individual serving as a manager must satisfy the same qualifications, background screening, core training and competency test requirements, and continuing education requirements as an administrator pursuant to paragraph (1)(a) of this rule. Managers who attended the core training program prior to , , are not required to take the competency test unless specified elsewhere in this rule. In addition, a manager may not serve as a manager of more than a single facility, except as provided in paragraph (1)(c) of this rule, and may not , serve as an administrator of any other facility. (e) Pursuant to section 429.176, F.S., facility owners must notify the Agency Central Office within 10 days of a change in facility administrator on the Notification of Change of Administrator form, AHCA Form 3180-1006, , which is incorporated by reference and available online at:	{A 077}		

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{A 077}	Continued From page 3 http://www.flrules.org/Gateway/reference.asp?No=Ref-09393. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure that the facility's Administrator passed the required Core Assessment Competency Test. The findings included: On . . . . . at 01:00 PM, a call was placed to the Owner of the facility to conduct a desk review regarding the outstanding deficiency. The Owner, stated she believed the Administrator had faxed the form to another Surveyor about 3 weeks ago. However, this could not be verified. On at 01:15 PM, a call was placed to the Agency for Healthcare Administration, Assisted Living Facility (AHCA ALF)Licensing Department. The licensing unit staff member , stated they have not received verification from the Administrator indicating that she had passed the CORE competency this year. She also checked the website and Laserfiche and confirmed that she had never received the certificate indicating that the Administrator passed the Core. On . . . . . , a review of the online system to verify the successful examinees for the Core test was conducted. It was confirmed that the Administrator's name was not listed. On at 01:30 PM, the Administrator was contacted again to discuss the information obtained from the unit. She stated she never heard from the Examiner for the CORE test indicating whether she had passed the test. She	{A 077}		

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{A 077}	Continued From page 4 stated she took the test in . . . . . At this time, the Administrator was advised that the verification could not be verified for a passing score of the CORE test. An onsite visit was conducted on to further evaluate, whom the facility had designated as the Administrator and to determine if Core Competency requirement had been met. On at 10:00 AM during an onsite visit, an interview was conducted with the Administrator. She stated that when she spoke to the Surveyor on . . . . . , she did not have the results of the CORE exam. She stated that she was told on . . . . . , that she did not pass the test. She stated she had taken the test in , and did not pass. She stated that she had taken the test again on and did not have her test results. A review of the employment file was conducted for the Administrator. It was revealed that her application was dated . . . . . for the facility. A review of the AHCA Level II background screening was conducted. The Level II screening was dated . A further review of the employee personnel file revealed that the Administrator took the CORE classes on . . . . . The CORE certificate could not be located in the employee personnel file. On at 11:30 AM, an interview was conducted with the Owner of the facility. She stated that she and the Administrator had taken the CORE exam, and had not received a passing score since . She confirmed that she had not recommended a new Administrator to the AHCA licensing unit with a passing score. She acknowledged the findings.	{A 077}		

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{A 077}	Continued From page 5 Class III Uncorrected Surveyor: Albury, William	{A 077}		