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
	AL11965060	A. BUILDING: _____ B. WING _____	02/26/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALEA ASSISTED LIVING FACILITY	5304 NW 16TH STREET LAUDERHILL, FL 33313

(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 unannounced licensure Complaint Survey, #2021002997, and Focused Control survey were conducted to at Alea Assisted Living Facility. The facility had deficiencies at the time of the survey.	A 000		
A 161	429.275(2) FS; 59A-36.015(2) FAC Records - Staff 429.275 (2) The administrator or owner of a facility shall maintain personnel records for each staff member which contain, at a minimum, documentation of background screening, if applicable, documentation of compliance with all training requirements of this part or applicable rule, and a copy of all licenses or certification held by each staff who performs services for which licensure or certification is required under this part or rule. 59A-36.015 (2) STAFF RECORDS. (a) Personnel records for each staff member must contain, at a minimum, a copy of the employment application, with references furnished, and documentation verifying freedom from signs or symptoms of communicable . In addition, records must contain the following, as applicable: 1. Documentation of compliance with all staff training and continuing education required by rule 59A-36.011, F.A.C., 2. Copies of all licenses or certifications for all staff providing services that require licensing or certification, 3. Documentation of compliance with level 2 background screening for all staff subject to screening requirements as specified in section	A 161		

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A 161	Continued From page 1 429.174, F.S., and rule 59A-36.010, F.A.C., 4. For facilities with a licensed capacity of 17 or more residents, a copy of the job description given to each staff member pursuant to rule 59A-36.010, F.A.C., 5. Documentation verifying direct care staff and administrator participation in resident elopement drills pursuant to paragraph 59A-36.007(8)(c), F.A.C. (b) The facility is not required to maintain personnel records for staff provided by a licensed staffing agency or staff employed by an entity . . . . . 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 contractor as described in rule 59A-36.010, F.A.C. (c) The facility must maintain the written work schedules and staff time sheets for the most current 6 months as required by rule 59A-36.010, F.A.C. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to maintain staff employee records for 1 out of 4 sampled staff members, Staff A. The findings included: In an observation on . . . . . at 10:25 AM, Staff A was in the facility living room assisting Resident #1 by getting the resident a cup of water from the kitchen. In an interview with Staff A on at 10:55 AM, she stated she had been working in the facility for about 4 weeks and she received	A 161		

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A 161	Continued From page 2 payment for working there from the facility owner. She stated she usually worked during the weekdays in the mornings for about 3 hours and assisted the residents with numerous tasks, including getting them food or drinks and helping them to ambulate and/or transfer. Review of the facility personnel records indicated that Staff A did not have any records in place, which included no evidence of prevention training, and was not listed in the facility work schedule. In an interview conducted with the facility owner on at 11:30 AM, she stated she worked in the facility in the capacity of Manager and she did not have Staff A's employee record because she considered Staff A to be a volunteer. She stated Staff A had been working in the facility for a few weeks and this staff member provided direct care to the residents and also had access to the residents' living areas and personal property. Class III	A 161		
CZ813	59A-35.090(3)(c), FAC Results of Screening & Notification In File 59A-35.090 Background Screening. (3) Results of Screening and Notification. (c) The eligibility results of employee screening and the signed Attestation referenced in subsection 59A-35.090(2), F.A.C., must be in the employee's personnel file, maintained by the provider. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to provide 1 out of 4	CZ813		

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CZ813	Continued From page 3 staff member's, Staff A's, eligibility results of Background Screening (BGS). The findings included: In an observation on at 10:25 AM, Staff A was in the facility living room assisting Resident #1 by getting the resident a cup of water from the kitchen. In an interview with Staff A on at 10:55 AM, she stated she had been working in the facility for about 4 weeks and she received payment for working there from the facility owner. She stated she usually worked during the weekdays in the mornings for about 3 hours and assisted the residents with numerous tasks, including getting them food or drinks and helping them to ambulate and/or transfer. She stated she was not sure if she had her BGS completed. Review of the facility records indicated that Staff A did not have any BGS records in place. In an interview conducted with the facility owner on at 11:35 AM, she stated she worked in the facility in the capacity of Manager and she did not have Staff A's BGS eligibility results. She stated Staff A had been working in the facility for a few weeks and this staff member provided direct care to the residents and also had access to the residents' living areas and personal property. Unclassified	CZ813		
CZ814	435.12(2)(b-d), FS Background Screening Clearinghouse 435.12(2) Care Provider Background Screening	CZ814		

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CZ814	Continued From page 4 Clearinghouse.- (b) Until such time as the [illegible] are enrolled in the national retained print [illegible] 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 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 [illegible] 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; [illegible]; 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 interview, the facility failed to include 1 out of 4 sampled employees, Staff A, in its Background Screening (BGS) employee roster. The findings included: In an observation conducted on [illegible] at 10:25 AM, Staff A was in the facility living room and assisting Resident #1 by getting the resident a cup of water from the kitchen.	CZ814		

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CZ814	Continued From page 5 In an interview with Staff A on at 10:55 AM, she stated she had been working in the facility for about 4 weeks and received payment for working there from the facility owner. She stated she usually worked during the weekdays in the mornings for about 3 hours and assisted the residents with numerous tasks, including getting them food or drinks and helping them to ambulate and/or transfer. Review of the facility employee records indicated Staff A did not have any BGS records in place. In an interview conducted with the facility owner on at 11:35 AM, she stated she worked in the facility in the capacity of Manager and she was aware Staff A was not in the facility's BGS employee roster. She stated Staff A had been working in the facility for a few weeks and this staff member provided direct care to the residents and also had access to the residents' living areas and personal property. Unclassified	CZ814		