

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966458	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 04/13/2022
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

CENTRAL TAMPA ASSISTED LIVING

**5010 N 40 STREET NORTH
TAMPA, FL 33610**

(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 A complaint investigation (complaint number 2022000760) was conducted at Central Tampa Assisted Living on . There were deficiencies at the time of the survey.	A 000		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Agency for Health Care Administration

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NAME OF PROVIDER OR SUPPLIER CENTRAL TAMPA ASSISTED LIVING			STREET ADDRESS, CITY, STATE, ZIP CODE 5010 N 40 STREET NORTH TAMPA, FL 33610		
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CZ814	435.12(2)(b-d), FS Background Screening Clearinghouse 435.12 Care Provider Background Screening Clearinghouse.- (2)(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 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 interview, the facility failed to maintain the employment status of all employees within the Agency for Health Care Administration (AHCA) Background Screening Clearinghouse Roster within 10 business days for 1 of 1 (Administrator) employees sampled for record review.	CZ814			

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CZ814	Continued From page 1 Findings included: Review of the AHCA Background Screening Clearinghouse Roster Agency Website on _____, revealed that the Administrator who became the Administrator of record on _____ was not listed on the AHCA Background Screening Clearinghouse Roster Agency Website. (Photographic evidence obtained) During an interview conducted on _____ at 11:53am, the Administrator confirmed that AHCA Background Screening Clearinghouse Roster Agency Website was not maintained and did not reflect the current employment status of the facilities staff. The Administrator stated, "That was my mistake I forgot to add myself to the roster." Unclassified	CZ814		