

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968676	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 04/18/2023
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

ALL DUNN ASSISTANT LIVING, INC.

**5726-28 LINCOLN STREET
HOLLYWOOD, FL 33021**

(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 Relicensure and Generator Monitoring survey was conducted on at All Dunn Assisted Living Inc. The facility had a deficiency identified related to the Relicensure at the time of the survey.	A 000		

AHCA Form 3020-0001

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

TITLE

(X6) DATE

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NAME OF PROVIDER OR SUPPLIER ALL DUNN ASSISTANT LIVING, INC.		STREET ADDRESS, CITY, STATE, ZIP CODE 5726-28 LINCOLN STREET HOLLYWOOD, FL 33021			
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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 register and include 1 out of 3 sampled employees reviewed, (Staff A), documentation of this staff member's employment status within the facility's Background Screening (BGS) Clearinghouse Roster.	CZ814			

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CZ814	Continued From page 1 The findings included: Review of the facility records revealed that resident Caregiver Staff A's most recent date of hire was listed as to work the 8:00 AM to 8:00 PM and 8:00 PM to 8:00 AM shifts. Review of the facility's BGS Clearinghouse Roster dated on revealed that Caregiver Staff A's name was not listed on the BGS Clearinghouse Roster as being an employee of the facility. In an interview conducted with the Administrator on at 1:15 PM, she confirmed that Caregiver Staff A was hired on as a resident Caregiver and that she failed to update the facility BGS Clearinghouse Roster to include Caregiver Staff A's name, date of hire and position. Unclassified	CZ814		