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 |
|---|---|---|---|
| | AL11910692 | A. BUILDING: _____ B. WING _____ | 09/12/2023 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| JOHN KNOX VILLAGE OF FLORIDA, | 840 LAKESIDE CIRCLE POMPANO BEACH, FL 33060 |

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| A 000 | Initial Comments<br><br>An unannounced Relicensure with Extended Congregate Care (ECC), Complaint (#2023003514) and Generator Monitoring survey was conducted on [redacted] at John Knox Village of Florida, Inc. The facility had deficiencies related to the Relicensure at the time of the survey. | A 000 | | |
| A 078 | 59A-36.010(2) FAC Staffing Standards - Staff<br><br>(2) STAFF.<br>(a) Within 30 days after beginning employment, newly hired staff must submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable [redacted]. The examination performed by the health care provider must have been conducted no earlier than 6 months before submission of the statement. Newly hired staff does not include an employee transferring without a break in service from one facility to another when the facility is under the same management or ownership.<br>1. Evidence of a negative [redacted] examination must be documented on an annual basis. Documentation provided by the Florida Department of Health or a licensed health care provider certifying that there is a shortage of [redacted] testing materials satisfies the annual [redacted] examination requirement. An individual with a positive [redacted] test must submit a health care provider's statement that the individual does not constitute a risk of [redacted].<br>2. If any staff member has, or is suspected of having, a communicable [redacted], such individual must be immediately removed from duties until a written statement is submitted from a health care provider indicating that the individual does not | A 078 | | |

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| A 078 | Continued From page 1<br>constitute a risk of transmitting a communicable<br><br>(b) Staff must be qualified to perform their assigned duties consistent with their level of education, training, preparation, and experience. Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff must exercise their responsibilities, consistent with their qualifications, to observe residents, to document observations on the appropriate resident's record, and to report the observations to the resident's health care provider in accordance with this rule chapter.<br>(c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C.<br>(d) An assisted living facility to provide services to residents must ensure that individuals providing services are qualified to perform their assigned duties in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor must specifically describe the services the staffing agency or contractor will provide to residents.<br>(e) For facilities with a licensed capacity of 17 or more residents, the facility must:<br>1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and,<br>2. Maintain time sheets for all staff.<br>(f) Level 2 background screening must be conducted for staff, including staff by the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on record review and interview, the facility failed to ensure 4 of 4 sampled employee files reviewed contained the one time statement from a Health Care Provider the employee was free of | A 078 | | |

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| A 078 | Continued From page 2<br><br>signs or symptoms of Communicable ; in addition the facility failed to ensure ( ) examinations were conducted on an annual basis as required, specifically related to Staff A, Staff B, Staff C and Staff D.<br><br>The findings included:<br><br>Review of Staff A's employee file revealed a hire date of as the Administrator who works variable hours. Staff A's file contained no evidence of documentation of the one time statement from a Health Care Provider freedom from a Communicable in addition to no evidence of documentation of an annual examination had been conducted.<br><br>Review of Staff B's employee file revealed a hire date of as a Certified Nursing Assistant to work the 3:00 PM to 11:00 PM shift. Staff B's file contained no evidence of documentation of the one time statement from a Health Care Provider freedom from a Communicable in addition to no evidence of documentation of an annual examination had been conducted.<br><br>Review of Staff C's employee file revealed a hire date of as a Licensed Practical Nurse to work the 7:00 AM to 3:00 PM shift. Staff C's file contained no evidence of documentation of the one time statement from a Health Care Provider freedom from a Communicable in addition to no evidence of documentation of an annual examination had been conducted.<br><br>Review of Staff D's employee file revealed a hire date of as a Certified Nursing Assistant to work the 11:00 PM to 7:00 AM shift. Staff D's file contained no evidence of documentation of the one time statement from a | A 078 | | |

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| A 078 | Continued From page 3<br><br>Health Care Provider freedom from a Communicable in addition to no evidence of documentation of an annual examination had been conducted.<br><br>On requests were made to the Administrator for the required documentation at 10:15 AM, 11:57 AM, 12:20 PM, 12:55 PM, and 2:56 PM.<br><br>During the exit interview conducted on at 4:11 PM with the Administrator, she acknowledged that she had requested the missing documents from Human Resources several times however had been unsuccessful.<br><br>Class III | A 078 | | |

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| CZ814 | 435.12(2)(b-d), FS Background Screening Clearinghouse<br><br>435.12 Care Provider Background Screening Clearinghouse.-<br>(2)(b) Until such time as the [illegible] 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.<br>(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 5 business days.<br>(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.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on interview and record review, the facility failed to ensure 1 of 4 sampled employees were entered in the Background Screening Clearinghouse Roster within 10 business days of employment as required, specifically Staff A, the | CZ814 | | |

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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| CZ814 | Continued From page 1<br><br>Administrator.<br><br>The findings included:<br><br>Review of the employee file for Staff A Administrator revealed a date of hire to the facility on . . . . . .<br><br>Review of the Background Screening Clearinghouse Roster website on revealed Staff A Administrator was not entered in the Roster as being employed at the facility as of . . . . . .<br><br>On . . . . . , the facility Human Resources Director was unavailable for interview.<br><br>On , at 10:15 AM, 11:57 AM, 12:20 PM, 12:55 PM and 2:56 PM, requests were made to Staff A Administrator for documentation she had been entered on the Background Screening Clearinghouse Roster within 10 business days of being employed at the facility.<br><br>On . . . . . at 4:11 PM, during the exit interview conducted with Staff A Administrator, she acknowledged she was unsuccessful in finding out the reason why she had not been entered into the Background Screening Clearinghouse Roster upon employment at the facility.<br><br>Unclassified | CZ814 | | |