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
	AL11965639	A. BUILDING: _____ B. WING _____	12/05/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
UNIQUE ASSISTED LIVING RESIDENCE	8501 NW 38TH STREET CORAL SPRINGS, FL 33065

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CZ815	408.809(1)( ); 435.02(2); 435.06 FS Background Screening; Prohibited Offenses 408.809 Background screening; prohibited offenses.- (1) Level 2 background screening pursuant to chapter 435 must be conducted through the agency on each of the following persons, who are considered employees for the purposes of conducting screening under chapter 435: (a) The licensee, if an individual. (b) The administrator or a similarly titled person who is responsible for the day-to-day operation of the provider. (c) The financial officer or similarly titled individual who is responsible for the financial operation of the licensee or provider. (d) Any person who is a controlling interest. (e) Any person, as required by authorizing statutes, seeking employment with a licensee or provider who is expected to, or whose responsibilities may require him or her to, provide personal care or services directly to clients or have access to client funds, personal property, or living areas; and any person, as required by authorizing statutes, ˬ with a licensee or provider whose responsibilities require him or her to provide personal care or personal services directly to clients, or ˬ with a licensee or provider to work 20 hours a week or more who will have access to client funds, personal property, or living areas. Evidence of contractor screening may be retained by the contractor's employer or the licensee. (3) All ˬ , must be provided in electronic format. Screening results shall be reviewed by the agency with respect to the offenses specified in s. 435.04 and this section, and the qualifying or disqualifying status of the person named in the request shall be maintained in a database. The	CZ815		

AHCA Form 3020-0001

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

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CZ815	Continued From page 1	CZ815		

qualifying or disqualifying status of the person named in the request shall be posted on a secure website for retrieval by the licensee or designated agent on the licensee's behalf.

(4) In addition to the offenses listed in s. 435.04, all persons required to undergo background screening pursuant to this part or authorizing statutes must not have an . . . awaiting final disposition for, must not have been found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, and must not have been adjudicated delinquent and the record not have been sealed or expunged for any of the following offenses or any similar offense of another jurisdiction:
(a) Any authorizing statutes, if the offense was a felony.
(b) This chapter, if the offense was a felony.
(c) Section 409.920, relating to Medicaid provider fraud.
(d) Section 409.9201, relating to Medicaid fraud.
(e) Section 741.28, relating to domestic violence.
(f) Section 777.04, relating to attempts, solicitation, and conspiracy to commit an offense listed in this subsection.
(g) Section 784.03, relating to battery, if the victim is a adult as defined in s. 415.102 or a patient or resident of a facility licensed under chapter 395, chapter 400, or chapter 429.
(h) Section 817.034, relating to fraudulent acts through mail, wire, radio, electromagnetic, photoelectronic, or photooptical systems.
(i) Section 817.234, relating to false and fraudulent insurance claims.
(j) Section 817.481, relating to obtaining goods by using a false or expired credit card or other credit device, if the offense was a felony.
(k) Section 817.50, relating to fraudulently

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CZ815	Continued From page 2 obtaining goods or services from a health care provider. (l) Section 817.505, relating to patient brokering. (m) Section 817.568, relating to criminal use of personal identification information. (n) Section 817.60, relating to obtaining a credit card through fraudulent means. (o) Section 817.61, relating to fraudulent use of credit cards, if the offense was a felony. (p) Section 831.01, relating to forgery. (q) Section 831.02, relating to uttering forged instruments. (r) Section 831.07, relating to forging bank bills, checks, drafts, or promissory notes. (s) Section 831.09, relating to uttering forged bank bills, checks, drafts, or promissory notes. (t) Section 831.30, relating to fraud in obtaining medicinal drugs. (u) Section 831.31, relating to the sale, manufacture, delivery, or possession with the intent to sell, manufacture, or deliver any counterfeit controlled substance, if the offense was a felony. (v) Section 895.03, relating to racketeering and collection of unlawful debts. (w) Section 896.101, relating to the Florida Money Laundering Act. If, upon rescreening, a person who is currently employed or . . . . . with a licensee and was screened and qualified under s. 435.04 has a disqualifying offense that was not a disqualifying offense at the time of the last screening, but is a current disqualifying offense and was committed before the last screening, he or she may apply for an exemption from the appropriate licensing agency and, if agreed to by the employer, may continue to perform his or her duties until the licensing agency renders a decision on the application for exemption if the person is eligible	CZ815		

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CZ815	Continued From page 3 to apply for an exemption and the exemption request is received by the agency no later than 30 days after receipt of the rescreening results by the person. (5) The costs associated with obtaining the required screening must be borne by the licensee or the person subject to screening. Licensees may reimburse persons for these costs. The Department of Law Enforcement shall charge the agency for screening pursuant to s. 943.053(3). The agency shall establish a schedule of fees to cover the costs of screening. (6)(a) As provided in chapter 435, the agency may grant an exemption from disqualification to a person who is subject to this section and who: 1. Does not have an active professional license or certification from the Department of Health; or 2. Has an active professional license or certification from the Department of Health but is not providing a service within the scope of that license or certification. (b) As provided in chapter 435, the appropriate regulatory board within the Department of Health, or the department itself if there is no board, may grant an exemption from disqualification to a person who is subject to this section and who has received a professional license or certification from the Department of Health or a regulatory board within that department and that person is providing a service within the scope of his or her licensed or certified practice. (7) The agency and the Department of Health may adopt rules pursuant to ss. 120.536(1) and 120.54 to implement this section, chapter 435, and authorizing statutes requiring background screening and to implement and adopt criteria	CZ815		

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CZ815	Continued From page 4 relating to retaining [redacted] pursuant to s. 943.05(2). (8) There is no reemployment assistance or other monetary liability on the part of, and no cause of action for damages arising against, an employer that, upon notice of a disqualifying offense listed under chapter 435 or this section, terminates the person against whom the report was issued, whether or not that person has filed for an exemption with the Department of Health or the agency. 435.06 Exclusion from employment.- (1) If an employer or agency has reasonable cause to believe that grounds exist for the denial or termination of employment of any employee as a result of background screening, it shall notify the employee in writing, stating the specific record that indicates noncompliance with the standards in this chapter. It is the responsibility of the affected employee to contest his or her disqualification or to request exemption from disqualification. The only basis for contesting the disqualification is proof of mistaken identity. (2)(a) An employer may not hire, select, or otherwise allow an employee to have contact with any person that would place the employee in a role that requires background screening until the screening process is completed and demonstrates the absence of any grounds for the denial or termination of employment. If the screening process shows any grounds for the denial or termination of employment, the employer may not hire, select, or otherwise allow the employee to have contact with any person that would place the employee in a role that requires background screening unless the employee is granted an	CZ815		

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CZ815	Continued From page 5	CZ815		

exemption for the disqualification by the agency as provided under s. 435.07.
(b) If an employer becomes aware that an employee has been for a disqualifying offense, the employer must remove the employee from contact with any person that places the employee in a role that requires background screening until the is resolved in a way that the employer determines that the employee is still eligible for employment under this chapter.
(c) The employer must terminate the employment of any of its personnel found to be in noncompliance with the minimum standards of this chapter or place the employee in a position for which background screening is not required unless the employee is granted an exemption from disqualification pursuant to s. 435.07.
(d) An employer may hire an employee to a position that requires background screening before the employee completes the screening process for training and orientation purposes. However, the employee may not have direct contact with persons until the screening process is completed and the employee demonstrates that he or she exhibits no behaviors that warrant the denial or termination of employment.
(3) Any employee who refuses to cooperate in such screening or refuses to timely submit the information necessary to complete the screening, including , if required, must be disqualified for employment in such position or, if employed, must be dismissed.
(4) There is no reemployment assistance or other monetary liability on the part of, and no cause of action for damages against, an employer that, upon notice of a conviction or for a disqualifying offense listed under this chapter,

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CZ815	Continued From page 6 terminates the person against whom the report was issued or who was , regardless of whether or not that person has filed for an exemption pursuant to this chapter. 435.02 Definitions.-For the purposes of this chapter, the term: (2) "Employee" means any person required by law to be screened pursuant to this chapter, including, but not limited to, persons who are contractors, licensees, or volunteers. This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure the safety of the residents. As evidenced by 4 of the 4 residents residing in the facility were left under the care of a Private Duty Aide (PDA) with no verification of a Level 2 Background Screening requirement. The findings included: Upon arrival at the facility on at 8:57 AM, this surveyor was greeted by a Private Duty Aide (PDA) who was not an employee of the facility. An attempt was made to communicate with the PDA however she spoke no English. The PDA then proceeded to telephone the Administrator, however the conversation could not be determined as it was not in English. There were no other staff members observed in the facility at this time. After their conversation was over, this surveyor telephoned the Administrator to advise her of the Relicensure survey being conducted and she stated she will not be coming to the facility and her staff just went to the store and would return shortly. A request was made to the Administrator for the correct spelling of the PDA's last name to which the Administrator stated she did not know her last name because	CZ815		

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CZ815	Continued From page 7 the PDA is not an employee of the facility, she is a private aide hired by the family of Resident #1. An inquiry was made if this PDA, who is not an employee of the facility and who was left in charge of the 4 residents had a Level 2 Background Screening, to which the Administrator stated she knew nothing about the PDA, the family hired her so she is not sure if she is a Home Health Aide, Certified Nursing Assistant or has a background screening completed. On ... at 9:45 AM, Staff C Assistant Administrator and Staff D Home Health Aide (HHA) arrived to the facility. An inquiry was made why they left the 4 residents with someone who is not employed by the facility. Staff C Assistant Administrator stated she was having a personal issue and lost something. An inquiry was made why both Staff C and Staff D needed to leave. Staff C Assistant Administrator stated they both should not have left together, HHA Staff D could have stayed however Staff C had her join her. A request was made for the PDA's employee file, to which Staff C Assistant Administrator confirmed they do not have a file on her as she is not an employee of the facility. On ... at 3:04 PM, during an interview conducted with the Administrator and Staff C Assistant Administrator, they stated that they have no information on the PDA and do not know if she has a Level 2 Background Screening. They acknowledged the PDA was left in the facility alone with the 4 residents. Unclassified	CZ815		

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A 000	Initial Comments An unannounced Relicensure and Generator Monitoring survey was conducted on [redacted] at Unique Assisted Living Residence. The facility had deficiencies identified related to the Relicensure at the time of the survey.	A 000		
A 025	429.26(7) FS; 59A-36.007(1) FAC Resident Care - Supervision 429.26 (7) The facility shall notify a licensed physician when a resident exhibits signs of [redacted] or [redacted] or has a change of condition in order to rule out the presence of an underlying physiological condition that may be contributing to such [redacted] or [redacted]. The notification must occur within 30 days after the acknowledgment of such signs by facility staff. If an underlying condition is determined to exist, the facility must notify the resident's representative or designee of the need for health care services and must assist in making [redacted] for the necessary care and services to treat the condition. If the resident does not have a representative or designee or if the resident's representative or designee cannot be located or is unresponsive, the facility shall arrange with the appropriate health care provider for the necessary care and services to treat the condition. 59A-36.007 Resident Care Standards. An assisted living facility must provide care and services appropriate to the needs of residents accepted for admission to the facility. (1) SUPERVISION. Facilities must offer personal supervision as appropriate for each resident, including the following: (a) Monitoring of the quantity and quality of	A 025		

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A 025	Continued From page 1 resident diets in accordance with Rule 59A-36.012, F.A.C. (b) Daily observation by designated staff of the activities of the resident while on the premises, and awareness of the general health, safety, and physical and emotional well-being of the resident. (c) Maintaining a general awareness of the resident's whereabouts. The resident may travel independently in the community. (d) Contacting the resident's health care provider and other appropriate party such as the resident's family, guardian, health care surrogate, or case manager if the resident exhibits a significant change. (e) Contacting the resident's family, guardian, health care surrogate, or case manager if the resident is discharged or moves out. (f) Maintaining a written record, updated as needed, of any significant changes, any illnesses that resulted in medical attention, changes in the method of medication administration, or other changes that resulted in the provision of additional services. This Statute or Rule is not met as evidenced by: Based on observation and interviews, it was determined that the facility failed to ensure adequate supervision for the residents from facility staff as evidenced by 4 of the 4 residents residing in the facility were left without supervision from a facility staff member. The findings included: Upon arrival at the facility on at 8:57 AM, this surveyor was greeted by a Private Duty Aide (PDA) who was not an employee of the facility. An attempt was made to communicate with the PDA however she spoke no English. The	A 025		

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A 025	Continued From page 2 PDA then proceeded to telephone the Administrator, however the conversation could not be determined as it was not in English. There were no other staff members observed in the facility at this time. After their conversation was over, this surveyor telephoned the Administrator to advise her of the Relicensure survey being conducted and she stated she will not be coming to the facility and her staff just went to the store and would return shortly. A request was made to the Administrator for the correct spelling of the PDA's last name to which the Administrator stated she did not know her last name because the PDA is not an employee of the facility, she is a private aid hired by the family of Resident #1. An inquiry was made if this PDA, who is not an employee of the facility and who was left in charge of the 4 residents had any training to which the Administrator stated she knew nothing about the PDA, the family hired her so she is not sure if she is a Home Health Aide, Certified Nursing Assistant or has any emergency training or background screening. On ..... at 9:45 AM, Staff C Assistant Administrator and Staff D Home Health Aide (HHA) arrived to the facility. An inquiry was made why they left the 4 residents with someone who is not employed by the facility. Staff C Assistant Administrator stated she was having a personal issue and lost something. An inquiry was made why both Staff C and Staff D needed to leave. Staff C Assistant Administrator stated they both should not have left together, HHA Staff D could have stayed, however Staff C had her join her. A further inquiry was made if they went to the store per the conversation held with the Administrator. Staff C Assistant Administrator stated they did not go to the store, she lost something, and it was an important personal issue unrelated to the facility.	A 025		

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A 025	Continued From page 3 A request was made for the PDA's employee file, to which Staff C Assistant Administrator confirmed they do not have a file on her as she is not an employee of the facility. On at 3:04 PM during an interview conducted with the Administrator and Staff C Assistant Administrator, they stated that they have no information on the PDA and they acknowledged that she was left in the facility alone with the 4 residents. Class III	A 025		
A 080	429.52( ) FS; 59A-36.011(1) FAC Training - Core & Competency Test 429.52 (2) Administrators and other assisted living facility staff must meet minimum training and education requirements established by the agency by rule. This training and education is intended to assist facilities to appropriately respond to the needs of residents, to maintain resident care and facility standards, and to meet licensure requirements. (3) The agency, in conjunction with providers, shall develop core training requirements for administrators consisting of core training learning objectives, a competency test, and a minimum required score to indicate successful passage of the core competency test. The required core competency test must cover at least the following topics: (a) State law and rules relating to assisted living facilities. (b) Resident rights and identifying and reporting , neglect, and . (c) Special needs of elderly persons, persons with mental illness, and persons with	A 080		

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A 080	Continued From page 4 . . . . . and how to meet those needs. (d) Nutrition and food service, including acceptable sanitation practices for preparing, storing, and serving food. (e) Medication management, recordkeeping, and proper techniques for assisting residents with self-administered medication. (f) Firesafety requirements, including fire evacuation drill procedures and other emergency procedures. (g) Care of persons with . . . 's . . . . . and related . . 59A-36.011 (1) ASSISTED LIVING FACILITY CORE TRAINING REQUIREMENTS AND COMPETENCY TEST. (a) The assisted living facility core training requirements established by the department pursuant to section 429.52, F.S., shall consist of a minimum of 26 hours of training plus a competency test. (b) Administrators and managers must successfully complete the assisted living facility core training requirements within 3 months from the date of becoming a facility administrator or manager. Successful completion of the core training requirements includes passing the competency test. The minimum passing score for the competency test is 75%. Administrators who have attended core training prior to . . , . . . , and managers who attended the core training program prior to , . . . , . . . , shall not be required to take the competency test. Administrators licensed as nursing home administrators in accordance with chapter 468, part II, F.S., are exempt from this requirement. (c) Administrators and managers shall participate in 12 hours of continuing education in topics	A 080		

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(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 080	Continued From page 5 related to assisted living every 2 years. (d) A newly hired administrator or manager who has successfully completed the assisted living facility core training and continuing education requirements, shall not be required to retake the core training. An administrator or manager who has successfully completed the core training but has not maintained the continuing education requirements will be considered a new administrator or manager for the purposes of the core training requirements and must: 1. Retake the assisted living facility core training; and, 2. Retake and pass the competency test. (e) The fees for the competency test shall not exceed $200.00. The payment for the competency test fee shall be remitted to the entity administering the test. A new fee is due each time the test is taken. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure the Assistant Administrator of the Assisted Living Facility (ALF) had completed the CORE training requirements. The findings included: When Staff C arrived to the facility on . . . . . at 9:45 AM, Staff C introduced herself as the facility's designated Assistant Administrator. During review of Staff C Assistant Administrator's personnel file, revealed she was hired on . . . . Further review of Staff C's file revealed there was no documentation of completion of the ALF CORE Training requirement completed within 3 months from the date of becoming the	A 080		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11965639	A. BUILDING: _____ B. WING _____	12/05/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
UNIQUE ASSISTED LIVING RESIDENCE	8501 NW 38TH STREET CORAL SPRINGS, FL 33065

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A 080	Continued From page 6 ALF Assistant Administrator, including passing of the competency test. During a further interview conducted on at 12:30 PM, Staff C confirmed she was hired on as the Assistant Administrator of the ALF. On at 2:30 PM, an interview was conducted with the Administrator who confirmed Staff C is the ALF Assistant Administrator. She further stated, "I was not aware of Staff C needing to complete the CORE Training." The Administrator acknowledged the finding. Class III	A 080		
A 083	59A-36.011(5) FAC Training - First Aid and (5) FIRST AID AND ( ). A staff member who has completed courses in First Aid and and holds a currently valid card documenting completion of such courses must be in the facility at all times. (a) Documentation that the staff member possess current certification that requires the student to demonstrate, in person, that he or she is able to perform and which is issued by an instructor or training provider that is approved to provide training by the American Red Cross, the American Association, the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education satisfies this requirement. (b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently	A 083		

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A 083	Continued From page 7 certified under chapter 401, Part III, F.S., shall be considered as having met the training requirements for both First Aid and C.P.R. This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure the safety of the residents. As evidenced by 4 of the 4 residents residing in the facility were left under the care of a Private Duty Aide (PDA) with no verification of any First Aid or [illegible] ( ) requirement for a staff member to have valid First Aid and certifications and who needs to be in the facility at all times. The findings included: Upon arrival at the facility on at 8:57 AM, this surveyor was greeted by a Private Duty Aide (PDA) who was not an employee of the facility. An attempt was made to communicate with the PDA however she spoke no English. The PDA then proceeded to telephone the Administrator, however the conversation could not be determined as it was not in English. There were no other staff members observed in the facility at this time. After their conversation was over, this surveyor telephoned the Administrator to advise her of the Relicensure survey being conducted and she stated she will not be coming to the facility and her staff just went to the store and would return shortly. A request was made to the Administrator for the correct spelling of the PDA's last name to which the Administrator stated she did not know her last name because the PDA is not an employee of the facility, she is a private aide hired by the family of Resident #1. An inquiry was made if this PDA, who is not an employee of the facility and who was left in charge of the 4 residents had any First Aid or	A 083		

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A 083	Continued From page 8 . training, to which the Administrator stated she knew nothing about the PDA, the family hired her so she is not sure if she is a Home Health Aide, Certified Nursing Assistant or has any First Aid or . training. On . . . . . at 9:45 AM, Staff C Assistant Administrator and Staff D Home Health Aide (HHA) arrived to the facility. An inquiry was made why they left the 4 residents with someone who is not employed by the facility. Staff C Assistant Administrator stated she was having a personal issue and lost something. An inquiry was made why both Staff C and Staff D needed to leave. Staff C Assistant Administrator stated they both should not have left together, HHA Staff D could have stayed however Staff C had her join her. A request was made for the PDA's employee file, to which Staff C Assistant Administrator confirmed they do not have a file on her as she is not an employee of the facility. On . . . . . at 3:04 PM, during an interview conducted with the Administrator and Staff C Assistant Administrator, they stated that they have no information on the PDA and do not know if she has a any First Aid or . training. They acknowledged the PDA was left in the facility alone with the 4 residents. Class III	A 083		