

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964665	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 08/26/2024
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

ARDEN COURTS (PALM HARBOR) A PROMEDICA ME

**2895 TAMPA ROAD
PALM HARBOR, FL 34684**

(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
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: 1. A person 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. 2. Effective _____, or a later date as determined by the Agency for Health Care Administration, for the participation of qualified entities in the clearinghouse under s. 435.12, a person with a break in service of more than 90 days from a position for which screening is conducted by a qualified entity participating in the clearinghouse must submit to a national screening if the person returns to a position for which screening is conducted by a qualified entity. (c) An employer of persons subject to screening or a qualified entity participating in the clearinghouse must register with the clearinghouse and maintain the employment or affiliation status of all persons included in the clearinghouse. 1. Before _____, initial status and any changes in status must be reported within 10 business days after a person receives his or her initial status or after a change in the person 's status has been made. 2. Effective _____, initial status and any changes in status must be reported within 5 business days after a person receives his or her initial status or after a change in the person 's status has been made.	CZ814		

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 ARDEN COURTS (PALM HARBOR) A PROMEDICA ME		STREET ADDRESS, CITY, STATE, ZIP CODE 2895 TAMPA ROAD PALM HARBOR, FL 34684		
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CZ814	Continued From page 1 (d) An employer or a qualified entity participating in the clearinghouse must register with and initiate all criminal history checks through the clearinghouse before referring an employee or potential employee or a person with a current or potential affiliation with a qualified entity for electronic submission to the Department of Law Enforcement. The registration must include the person'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 ensure employees were registered with the Agency for Healthcare Administration (AHCA) Background Screening Roster within five business days of hire date, for three (Staff A, Staff B, and Staff C) of four sampled staff. Findings Included: A record review for Staff A (Licensed Practical Nurse) employee file conducted on _____ revealed a hire date of _____. A record review for Staff B (Caregiver) employee file conducted on _____ revealed a hire date of _____. A record review for Staff C (Caregiver) employee file conducted on _____ revealed a hire date of _____.	CZ814		

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CZ814	Continued From page 2 A review of the facility AHCA background screening roster conducted on revealed Staff A, Staff B and Staff C were not listed on the facility roster. (Photographic Evidence Obtained) An interview with the Administrator conducted on at 11:58am, revealed Staff A was a current employee. She said that she was not aware that staff working at a sister facility and on the sister facility AHCA roster also had to be on their AHCA roster. She said she understood the deficiency and would have the roster updated. At 12:00PM, she confirmed Staff B and Staff C were still employed at the facility and were not on the roster, but should be. Unclassified	CZ814		
A 000	Initial Comments A complaint investigation (#2024011507 and #2024011292) in conjunction with a generator monitoring visit was conducted at Arden Courts (Palm Harbor) on Deficiencies were identified at the time of the visit.	A 000		