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
	AL11964874	A. BUILDING: _____ B. WING _____	02/08/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE CAPE CORAL	1416 COUNTRY CLUB BLVD CAPE CORAL, FL 33990

(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, emergency power plan, health facility reporting system, generator, visitation form, and complaint survey for #2023016324 was conducted on through at Brookdale Cape Coral, an assisted living facility in Cape Coral, Florida. Complaint #2023016324 was unsubstantiated. The following is a description of the deficiencies.	A 000		
A 078 SS=D	59A-36.010(2) FAC Staffing Standards - Staff (2) STAFF. (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 . 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. 1. Evidence of a negative 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 testing materials satisfies the annual examination requirement. An individual with a positive test must submit a health care provider's statement that the individual does not constitute a risk of . 2. If any staff member has, or is suspected of having, a communicable , such individual	A 078		

AHCA Form 3020-0001
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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A 078	Continued From page 1 must be immediately removed from duties until a written statement is submitted from a health care provider indicating that the individual does not constitute a risk of transmitting a communicable (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. (c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C. (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. (e) For facilities with a licensed capacity of 17 or more residents, the facility must: 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and, 2. Maintain time sheets for all staff. (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. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility	A 078		

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A 078	Continued From page 2	A 078		

failed to ensure that within 30 days of employment staff submit a written statement from a health care provider documenting the individual is free from signs/symptoms of communicable and evidence of a negative examination documented annually thereafter for 2 (Administrator, and Staff B) of 4 employee records reviewed.

The findings include:

Review of the Administrator's employee file revealed a hire date of . The administrators file contained evidence of an Associate Health Examination completed on with a statement signed by the health care provider indicating the administrator was free form signs and symptoms of communicable . Further review of the administrator's file revealed a physical exam form dated indicating a test was administered on and read on with negative results. There was no further documentation of freedom form communicable including annually thereafter.

Review of Staff B's employee file revealed a hire date of as a resident aide. Staff B's file contained evidence of lab results for a Quantiferon - Gold Plus test completed on . There was no evidence of a statement signed by a healthcare provider indicating Staff B was free from signs and symptoms of communicable .

On at 1:40 p.m., the Administrator confirmed Staff B's file contained no documentation of a statement from the healthcare provider indicating Staff B was free from signs and symptoms of communicable

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A 078	Continued From page 3 . . . . . including , and no documentation of freedom form communicable including annually for herself. Class III	A 078		

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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: 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

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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 staff interview, the facility failed to ensure 3 (Staff B, D, E) of 4 employees reviewed, had the Level 2 background screening employment status updated within 10 days on the Agency for Healthcare of administration (AHCA) Background screening clearinghouse website pursuant to chapter 435. This had the potential for staff with disqualifying offenses to have access to adults. The findings Included: Review of Staff B's employee file revealed a hire date of as a resident aide. Review of the Agency' clearing house employee roster revealed Staff B was added on the clearing house roster on , 180 days after hire. Review of Staff E's employee file revealed a hire date of as a resident aide. Review of the Agency' clearing house employee roster revealed	CZ814		

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CZ814	Continued From page 2 Staff E was added on the clearing house roster on , 194 days after hire. Review of Staff D's employee file revealed a hire date of as a resident aide. Review of the Agency' clearing house employee roster revealed the Staff D was not added to the facility background screen roster. On at 1:04 p.m., the Business Office Manager (BOM) reviewed AHCA background screen roster, and noted Staff D was not added to facility roster. BOM asked, "is that something I can add now." On at 1:45 p.m., the administrator acknowledged staff B, D and E were not added to the facility roster within 10 days as required . Unclassified	CZ814		