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
	AL11964062	A. BUILDING: _____ B. WING _____	08/21/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE VERO BEACH SOUTH	410 4TH COURT VERO BEACH, FL 32962

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A 000	Initial Comments AMENDED REPORT An unannounced Abbreviated Relicensure, Complaint (#2025002106), and a Generator Monitoring survey was conducted on at Brookdale Vero Beach South. The facility had deficiencies related to the Relicensure survey identified at the time of the visit. Note: The facility had no Limited Nursing Services (LNS) residents at the time of the survey.	A 000		
A 078	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	A 078		

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A 078	Continued From page 1 2. If any staff member has, or is suspected of having, a communicable , 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 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.	A 078		

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A 078	Continued From page 2 This Statute or Rule is not met as evidenced by: Based on observation, record review, and staff interview, the facility failed to: 1) Ensure 1 of 3 sampled staff reviewed provided a written statement from their primary care provider, within 30 days of hire, documenting that the individual did not have any signs or symptoms of a communicable [ ] (Staff C); and 2) Ensure 1 of 3 sampled staff reviewed provided evidence of a negative examination on an annual basis (Staff C). The findings included: 1) Staff C is a direct caregiver/CNA who provides care to residents during the 11:00 PM - 7:00 AM shift. Staff C was hired on . During Staff C's employee record review, no written statement from a primary care provider could be found which documented that Staff C had been examined and did not have any signs or symptoms of a communicable , including , within 30 days of her hire date. 2) Also, during Staff C's employee record review, there were no negative statements found in Staff B's record that were documented annually from , through . On at approximately 1:00 PM, the Administrator was informed of the missing health documentation for Staff C, and she was provided with the opportunity to provide any additional information to show regulatory compliance. At the time of exit on at 1:45 PM, the Administrator stated that no health statement or annual negative statements for Staff C could	A 078		

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A 078	Continued From page 3 be found. Class III	A 078		

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ZZ816	408.809(2) 435.05(2) 59A-35.090(2d-3b) Background Screening-Compliance Attestation 408.809 Background screening; prohibited offenses.- (2) Every 5 years following his or her licensure, employment, or entry into a contract in a capacity that under subsection (1) would require level 2 background screening under chapter 435, each such person must submit to level 2 background rescreening as a condition of retaining such license or continuing in such employment or contractual status. For any such rescreening, the agency shall request the Department of Law Enforcement to forward the person's ␣ , to the Federal Bureau of Investigation for a national criminal history record check unless the person's ␣ , are enrolled in the Federal Bureau of Investigation's national retained print notification program. If the ␣ , of such a person are not retained by the Department of Law Enforcement under s. 943.05(2)(g) and (h), the person must submit ␣ , electronically to the Department of Law Enforcement for state processing, and the Department of Law Enforcement shall forward the ␣ , to the Federal Bureau of Investigation for a national criminal history record check. The ␣ , shall be retained by the Department of Law Enforcement under s. 943.05(2)(g) and (h) and enrolled in the national retained print notification program when the Department of Law Enforcement begins participation in the program. The cost of the state and national criminal history records checks required by level 2 screening may be borne by the licensee or the person ␣ , . The agency may accept as satisfying the requirements of this section proof of compliance with level 2 screening standards submitted within the previous 5 years to meet any provider or	ZZ816		

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ZZ816	Continued From page 1	ZZ816		

professional licensure requirements of the Department of Financial Services for an applicant for a certificate of authority or provisional certificate of authority to operate a continuing care retirement community under chapter 651, provided that:
(a) The screening standards and disqualifying offenses for the prior screening are equivalent to those specified in s. 435.04 and this section;
(b) The person subject to screening has not had a break in service from a position that requires level 2 screening for more than 90 days; and
(c) Such proof is accompanied, under penalty of perjury, by an attestation of compliance with chapter 435 and this section using forms provided by the agency.

435.05 Requirements for covered employees and employers.-Except as otherwise provided by law, the following requirements apply to covered employees and employers:
(2) Every employee must attest, subject to penalty of perjury, to meeting the requirements for qualifying for employment pursuant to this chapter and agreeing to inform the employer immediately if for any of the disqualifying offenses while employed by the employer.

59A-35.090 Background Screening.
(d) Attestation of Compliance with Background Screening Requirements, AHCA Form 3100-0008, , herein incorporated by reference, must be completed by the individual and retained by the provider upon hire to attest that they meet the requirements for qualifying for employment, they have not been unemployed for more than 90 days from a position that requires Level 2 screening, and they agree to inform the employer immediately if for any

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ZZ816	Continued From page 2 disqualifying offense. The Attestation of Compliance is available at https://www.flrules.org/Gateway/reference.asp?No=Ref-17724, and available from the Agency for Health Care Administration's website at: https://ahca.myflorida.com/health-care-policy-and-oversight/bureau-of-central-services/background-screening/additional-information/regulations. (e) An administrator or chief financial officer must be screened and qualified prior to , , to the position. (3) Results of Screening and Notification. (a) Final results of background screening requests will be provided through the Agency's secure website that may be accessed by all health care providers applying for or actively licensed through the Agency that are registered with the Care Provider Background Screening Clearinghouse. The secure website is located at: apps.ahca.myflorida.com/SingleSignOnPortal. (b) If a Level 2 criminal history is incomplete, correspondence will be sent to the individual being screened requesting the report and court disposition information. Pursuant to Section 435.05(1)(d), F.S., the missing information must be filed with the Agency within 30 days of the Agency's request or the individual is subject to disqualification in accordance with Section 435.06(3), F.S. This Statute or Rule is not met as evidenced by: Based on record review and staff interview, the facility failed to ensure that 1of 4 sampled direct care employees who had a break in employment greater than 90 days was not allowed to have contact with any person until a Level II re-screening was completed and the result demonstrated the absence of any grounds for the denial of employment (Staff E)	ZZ816		

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ZZ816	Continued From page 3 The findings included: Staff E was hired on as the manager for this facility. She began working onsite, which allowed contact with all residents of this secure facility, beginning on . Staff E's work schedule was verified as Monday through Friday, 8:00 AM until 5:00 PM. A review of Staff E's background screening and employment history information on the AHCA Clearinghouse Screening Management System showed that Staff E's last background check was recorded as ; however, her eligibility determination status documented that a new screening was required. Staff E's employment history showed that Staff E's last employment date for her previous employer ended on . There had been no other employment recorded from until . On at approximately 11:30 AM, the Administrator was informed of the findings on the Clearinghouse Screening Management System website. The Administrator was given the opportunity to produce any documentation showing that a new screening had been requested and obtained prior to the date of hire. On at approximately 11:45 AM, the Administrator confirmed that a new screening for Staff E was needed, and it had not been done prior to hire. She stated that she had gone ahead and submitted the re-screening request on the Clearinghouse Screening Management System website. On at 1:30 PM, the Clearinghouse Screening Management System website was checked by this surveyor, and the rescreening	ZZ816		

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ZZ816	Continued From page 4 request for Staff E was showing as having been submitted by the Administrator on . Unclassified	ZZ816		