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
	AL11922253	A. BUILDING _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HAMMACK'S RETIREMENT HOME	4919 HAMMACK ROAD VERNON, FL 32462

(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 On [redacted] and [redacted] at Hammack's Assisted Living Facility , an unannounced compliant (CCR#2012008956) survey was conducted and deficiencies were found at the time of the visit.	A 000		
A 030 SS=D	58A-5.0182(6) FAC; 429.28 FS Resident Care - Rights & Facility Procedures (6) RESIDENT RIGHTS AND FACILITY PROCEDURES. (a) A copy of the Resident Bill of Rights as described in Section 429.28, F.S., or a summary provided by the Long-Term Care Ombudsman Council shall be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C. (b) In accordance with Section 429.28, F.S., the facility shall have a written grievance procedure for receiving and responding to resident complaints, and for residents to recommend changes to facility policies and procedures. The facility must be able to demonstrate that such procedure is implemented upon receipt of a complaint. (c) The address and telephone number for lodging complaints against a facility or facility staff shall be posted in full view in a common area accessible to all residents. The addresses and telephone numbers are: the District Long-Term Care Ombudsman Council, 1(888)831-0404; the Advocacy Center for Persons with 1(800)342-0823; the Florida Local Advocacy Council, 1(800)342-0825; and the Agency Consumer Hotline 1(888)419-3456. (d) The statewide toll-free telephone number of the Florida [redacted] Hotline " 1(800)9[redacted] or 1(800)962-2873 " shall be posted in full view in a common area accessible to all residents.	A 030		

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(e) The facility shall have a written statement of its house rules and procedures which shall be included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C. The rules and procedures shall address the facility ' s policies with respect to such issues, for example, as resident responsibilities, the facility ' s and tobacco policy, medication storage, the delivery of services to residents by third party providers, resident elopement, and other administrative and housekeeping practices, schedules, and requirements.
(f) Residents may not be required to perform any work in the facility without compensation, except that facility rules or the facility contract may include a requirement that residents be responsible for cleaning their own sleeping areas or apartments. If a resident is employed by the facility, the resident shall be compensated, at a minimum, at an hourly wage consistent with the federal minimum wage law.
(g) The facility shall provide residents with convenient access to a telephone to facilitate the resident ' s right to unrestricted and private communication, pursuant to Section 429.28(1)(d), F.S. The facility shall not prohibit unidentified telephone calls to residents. For facilities with a licensed capacity of 17 or more residents in which residents do not have private telephones, there shall be, at a minimum, an accessible telephone on each floor of each building where residents reside.
(h) Pursuant to Section 429.41, F.S., the use of physical shall be limited to half-bed rails, and only upon the written order of the resident ' s physician, who shall review the order biannually, and the consent of the resident or the resident ' s representative. Any device, including half-bed rails, which the resident chooses to use and can remove or avoid without assistance shall

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A 030	Continued From page 2 not be considered a physical [illegible] 429.28 Resident bill of rights.- (1) No resident of a facility shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law, the Constitution of the State of Florida, or the Constitution of the United States as a resident of a facility. Every resident of a facility shall have the right to: (a) Live in a safe and decent living environment, free from [illegible] and neglect. (b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy. (c) Retain and use his or her own clothes and other personal property in his or her immediate living quarters, so as to maintain individuality and personal dignity, except when the facility can demonstrate that such would be unsafe, impractical, or an infringement upon the rights of other residents. (d) Unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum. Upon request, the facility shall make provisions to extend visiting hours for caregivers and out-of-town guests, and in other similar situations. (e) Freedom to participate in and benefit from community services and activities and to achieve the highest possible level of independence, autonomy, and interaction within the community. (f) Manage his or her financial affairs unless the resident or, if applicable, the resident ' s representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as provided in s. 429.27.	A 030		

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(g) Share a his or her spouse if both are residents of the facility.
(h) Reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals except when prevented by inclement weather.
(i) Exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, nor any attendance at religious services, shall be imposed upon any resident.
(j) Access to adequate and appropriate health care consistent with established and recognized standards within the community.
(k) At least 45 days ' notice of relocation or termination of residency from the facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally , the guardian shall be given at least 45 days ' notice of a nonemergency relocation or residency termination. Reasons for relocation shall be set forth in writing. In order for a facility to terminate the residency of an individual without notice as provided herein, the facility shall show good cause in a court of competent jurisdiction.
(l) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without , interference, coercion, discrimination, or reprisal. Each facility shall establish a grievance procedure to facilitate the residents ' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or

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A 030	Continued From page 4 special interest groups. This Statute or Rule is not met as evidenced by: Based on observations and interviews the facility fail to honor resident's rights by not providing 11 of 11 sampled residents convenient access to a telephone, and failed to provide 11 of 11 sampled resident's their $54 each month. (#1 ,#2, #3 ,#4,#5,#6,#7,#8,#9,#10,#11). The facility also failed to provide 9 of 11 sampled residents compensation for performing work in the facility other then contracted house rules (#1,#2,#3,#4, #6, #7,#9, #10, #11) . Finding include: Convenient access to a telephone: 1) On at 9:30 AM during the facility tour, observed two telephones on a coffee table in the administrator's living area. 2) On an interview was conducted at 10:15 AM with the administrator confirmed telephones are located in his office and a portable phone to use. He did not have an explanation as to why a phone was not provided in the resident's area of the facility. 3) On at 10:30 AM during an interview with resident#7, he stated, resident's are told they cannot use the phone and it is for business use only, not for personal use. 4) On at 11:20 AM during an interview with resident # 1, he stated she never uses the phone, has no one to call but they are not	A 030		

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allowed to use the phone though.

5) On [redacted] at 11:29 AM during an interview with resident #10, he stated" they have never showed me where the phone is."

6) On [redacted] at 11:30 AM during an interview with resident#4, he states he is not allowed to use the phone to call out. If he receives a call, the owners will come and get him as the only phone is their private quarters.

7) On [redacted] at 1:25 PM an interview with the assistant administrator was conducted. She stated there is not a telephone in resident's area because there is not more than 16 residents that's why they didn't put one there.

$54 each month:

1) On [redacted] at 11:50 AM an interview was conducted with resident #2. He stated, he helps the administrator with tearing down a nearby house. He stated he was paid with a drink and cookies.

2) On [redacted] at 10:50 AM an interview was conducted with resident#3. She stated, " I don't receive my $54 each month only $3 each month and I don't understand why I don't" She stated she clean the house every day. She clean the [redacted] and dining [redacted] She stated, " Nobody pay's me nothing! "

3) On [redacted] at 11:30 AM an interview was conducted with resident #4. He stated, he does raking and weeding on the facility property or at the owner's family property next door. He reports

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A 030	Continued From page 6 he does not get paid. 4) On [redacted] at 12:05 PM an interview was conducted with resident #5. She stated, she does laundry on Sunday including changing and washing sheets. She stated she helps fold sheets and make beds. She does not get paid for this but will sometimes get candy. 5) On [redacted] at 11:00 AM an interview was conducted with resident #6. She stated, she does everyone's laundry on Monday,Wednesday, and Fridays. She also stated she helps in the kitchen. Said she does not get paid. 6) On [redacted] at 10:30 AM an interview was conducted with resident #7 He stated, he takes the trash out and sweeps the floors, hall, living [redacted] empties the butt can and he does not get paid for it. 7) On [redacted] at 11:45 AM an interview was conducted with #9. He stated, I clean the dining [redacted] 8) On [redacted] 11:29 AM an interview was conducted with resident #10. He stated, "I get out here and work and they don't give me money". " I wash the truck and sweep the porch and rack the yard." 9) On [redacted] 10:28 AM an interview was conducted with resident #11. He stated " I sweep and I help the administrator tear a house down over there (Points across the yard area field). " He stated, he did not get paid. 10) On [redacted] 1:07 PM an interview with the administrator was conducted. He stated	A 030		

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resident 's responsibilities are to clean their [redacted]. He stated residents don't get compensated for other work they do.

11) On [redacted] at 10:50 AM observed Notice on bulletin board read: ACTIVITIES and a list of "client " chores. Chores included Sweeping, Vacuum, Making Bed, Take Trash out, Mop, Clean dishes off table, Rake yard, and Fold cloths. (Obtained notice)

12) On [redacted] about 11:30 AM resident # 6 was observed going back and forth to washer and dryer which were on back porch. She had men's clean laundry folded up on her bed.

13) On [redacted] observed lunch at 12:00 PM-12:33 PM. Observed resident #6 racked plates after resident's were finished eating and cleaned tables. Resident # 3 got on her knees and picked up food crumbs off the floor then begin sweeping the floor.

14) A random review of resident files revealed Resident # 3 and #10 had full contracts signed and dated. The contracts included monthly amount, house rules, and policies. House rules included: Rule #1: No smoking accept in designated areas. Rule# 2 Help in keeping [redacted] and clean. (This was the only house rule regarding chores.) Rule#3 No food or drink allowed accept for in dining [redacted] (Obtain resident #3's contract)

Compensation for work performed in the facility:

1) On [redacted] at 1:07 PM an interview was conducted with the administrators. They stated

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A 030	Continued From page 8 resident's checks are deposit into the facilities account and they take the money out and they sign for it. The Assistant Administrator states money is spent on the resident personal items. The administrators confirmed they do not physically hand residents their $54 each month when they sign the log. 2) On ...: about 11:50 AM observed resident's siting in the living area watching TV Had a group discussion with resident's. The residents stated they don't get their $54 handed to them. They only receive about $3 after they sign the log. Therefore, resident's are signing a financial log stating they are receiving a total of $54.00 each month but only receives about $3. 3) A review of the financial log reveals residents signatures for the month of August ... and September ... Read: "Administrator" gave me $54.00. (Log obtained) Class III	A 030		
A 078 SS=D	58A-5.019(2) FAC Staffing Standards - Staff (2) STAFF. (a) Newly hired staff shall have 30 days to submit a statement from a health care provider, based on a examination conducted within the last six months, that the person does not have any signs or symptoms of a communicable disease ... tuberculosis. ... from tuberculosis ...: be documented on an annual basis. A person with a positive tuberculosis ...: must submit a health care provider ' s statement that the person does not constitute a risk of	A 078		

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A 078	Continued From page 9 communicating Newly hired staff does not include an employee transferring from one facility to another that is under the same management or ownership, without a break in service. If any staff member is later found to have, or is suspected of having, a communicable he/she shall be removed from duties until the administrator determines that such condition no longer exists. (b) All staff shall be assigned duties consistent with his/her level of education, training, preparation, and experience. Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff shall 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 58A-5.0191, F.A.C. (d) Staff provided by a staffing agency or employed by a business entity contracting to provide direct or indirect services to residents must be qualified for the position in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor shall specifically describe the services the staffing agency or contractor will be providing to residents. (e) For facilities with a licensed capacity of 17 or more residents, the facility shall: 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. This Statute or Rule is not met as evidenced by: Based on interviews, the facility failed to ensure	A 078		

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A 078	Continued From page 10 11 of 11 resident's (#1,#2, #3, #4, #5, #6, #7, #8, #9, #10, #11) are not at risk for a communicable ..... including ..... by allowing a none certified staff member to provide personnal care and services to residents when administrators are absent from the facility . Findings include: 1) On ..... interview was conducted at 1:17 PM with the administrator. He confirmed the staff member, his cousin comes to the facility and sits when the administrators are not at the facility. 2) On ..... the hours of 10:00 AM-12:00 AM interviews were conducted with resident's (#1,#2, #3, #4, #5, #6, #7, #8, #9, #10, #11). Resident's confirmed staff member comes and "babysitter" during the week and performs cooking, assistance with medication and cleaning duties. Class III	A 078		
AL242 SS=D	58A-5.029(3) FAC LMH - Responsibilities of Facility (3) RESPONSIBILITIES OF FACILITY. In addition to the staffing and care standards of this rule chapter to provide for the welfare of residents in an assisted living facility, a facility holding a limited mental health license must: (a) Meet the facility ' s obligation to ..... the resident in carrying out the activities identified in Community Living Support Plan. (b) Provide an opportunity for private face-to-face contact between the mental health resident and the resident ' s mental health case manager or other treatment personnel of the resident ' s	AL242		

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mental health care provider.
(c) Observe resident behavior and functioning in the facility, and record and communicate observations to the resident ' s mental health case manager or mental health care provider regarding any significant behavioral or situational changes which may signify the need for a change in the resident ' s professional mental health services, supports and services described in the community living support plan, or that the resident is no longer appropriate for residency in the facility.
(d) Ensure that designated staff have completed limited mental health training as required by Rule 58A-5.0191, F.A.C.
(e) Maintain facility, staff, and resident records in accordance with the requirements of this rule.
L092 58A-5.0191 (8) LIMITED MENTAL HEALTH TRAINING.
(a) Pursuant to Section 429.075, F.S., the administrator, managers and staff, who have direct contact with mental health residents in a licensed limited mental health facility, must receive the following training:
1. A minimum of 6 hours of specialized training in working with individuals with mental health diagnoses.
a. The training must be provided or approved by the Department of Children and Families and must be taken within 6 months of the facility ' s receiving a limited mental health license or within 6 months of employment in a limited mental health facility.
b. Staff in " direct contact " means direct care staff and staff whose duties take them into resident living areas and require them to interact with mental health residents on a daily basis. The term does not include maintenance, food service or administrative staff, if such staff have only incidental contact with mental health residents.

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c. Training received under this subparagraph may count once for 6 of the 12 hours of continuing education required for administrators and managers pursuant to Section 429.52(4), F.S., and subsection (1) of this rule.
2. A minimum of 3 hours of continuing education, which may be provided by the ALF administrator or through distance learning, biennially thereafter in subjects dealing with one or more of the following topics:
a. Mental health diagnoses; and
b. Mental health treatment such as mental health needs, services, behaviors and appropriate interventions; resident progress in achieving treatment goals; how to recognize changes in the resident ' s status or condition that may affect other services received or may require intervention; and crisis services and the Baker Act procedures.
3. For administrators and managers, the continuing education requirement under this subsection will satisfy 3 of the 12 hours of continuing education required biennially pursuant to Section 429.52(4), F.S., and subsection (1) of this rule.
4. Administrators, managers and direct contact staff affected by the continuing education requirement under this subsection shall have up to 6 months after the effective date of this rule to meet the training requirement.
(b) Administrators, managers and staff do not have to repeat the initial training should they change employers provided they present a copy of their training certificate to the current employer for retention in the facility ' s personnel files. They must also ensure that copies of the continuing education training certificates, pursuant to subparagraph (a)2. of this subsection, are retained in their personnel files.

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AL242	Continued From page 13 This Statute or Rule is not met as evidenced by: Based on administrator interview, the facility failed to ensure the designated relief staff member had completed limited mental health training. Findings include: 1) During an interview on [redacted] at 10:07 AM , the administrator confirmed the staff member did not have any training. He stated , " I didn't know that staff member had to have training. " The administrator also stated there were no records at the facility for staff member. Class III	AL242		
AZ815	408.809, 435.02(2), 435.06 Background Screening; Prohibited Offenses 408.809, F.S. (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	AZ815		

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	AL11922253	A. BUILDING _____ B. WING _____	

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AZ815	Continued From page 14	AZ815		

operation of the licensee or provider.
(d) Any person who is a controlling interest if the agency has reason to believe that such person has been convicted of any offense prohibited by s. 435.04. For each controlling interest who has been convicted of any such offense, the licensee shall submit to the agency a description and explanation of the conviction at the time of license application.
(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, contracting with a licensee or provider whose responsibilities require him or her to provide personal care or personal services directly to clients. Evidence of contractor screening may be retained by the contractor ' s employer or the licensee.

(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 fingerprints to the Federal Bureau of Investigation for a national criminal history record check. If the fingerprints of such a person are not retained by the Department of Law Enforcement under s. 943.05(2)(g), the person must file a complete set of fingerprints with the agency and the agency shall forward the fingerprints to the Department of

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AZ815	Continued From page 15	AZ815		

Law Enforcement for state processing, and the Department of Law Enforcement shall forward the fingerprints to the Federal Bureau of Investigation for a national criminal history record check. The fingerprints may be retained by the Department of Law Enforcement under s. 943.05(2)(g). 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 fingerprinted. Proof of compliance with level 2 screening standards submitted within the previous 5 years to meet any provider or professional licensure requirements of the agency, the Department of Health, the Agency for Persons with the Department of Children and Family Services, or 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 satisfies the requirements of this section if the person subject to screening has not been unemployed for more than 90 days and such proof is accompanied, under penalty of perjury, by an affidavit of compliance with the provisions of chapter 435 and this section using forms provided by the agency.

(3) All fingerprints 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 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.

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AZ815	Continued From page 16	AZ815		

(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 817.034, relating to fraudulent acts through mail, wire, radio, electromagnetic, photoelectronic, or photooptical systems.
(g) Section 817.234, relating to false and fraudulent insurance claims.
(h) Section 817.505, relating to patient brokering.
(i) Section 817.568, relating to criminal use of personal identification information.
(j) Section 817.60, relating to obtaining a credit card through fraudulent means.
(k) Section 817.61, relating to fraudulent use of credit cards, if the offense was a felony.
(l) Section 831.01, relating to forgery.
(m) Section 831.02, relating to uttering forged instruments.
(n) Section 831.07, relating to forging bank bills, checks, drafts, or promissory notes.
(o) Section 831.09, relating to uttering forged bank bills, checks, drafts, or promissory notes.

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AZ815	Continued From page 17	AZ815		

(p) Section 831.30, relating to fraud in obtaining medicinal drugs.
(q) 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.
A person who serves as a controlling interest of, is employed by, or contracts with a licensee on . 2010, who has been screened and qualified according to standards specified in s. 435.03 or s. 435.04 must be rescreened by 31, 2015. The agency may adopt rules to establish a schedule to stagger the implementation of the required rescreening over the 5-year period, beginning , 2010, through 2015. If, upon rescreening, such person 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 to apply for an exemption and the exemption request is received by the agency within 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.

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AZ815	Continued From page 18 (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 relating to retaining fingerprints pursuant to s. 943.05(2). (8) There is no unemployment compensation 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, F.S.	AZ815		

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(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 vulnerable 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 vulnerable that would place the employee in a role that requires background screening unless the employee is granted an exemption for the disqualification by the agency as provided under s. 435.07.

(b) If an employer becomes aware that an employee has been arrested for a disqualifying offense, the employer must remove the employee from contact with any vulnerable person places the employee in a role that requires background screening until the arrest is 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

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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.

(3) Any employee who refuses to cooperate in such screening or refuses to timely submit the information necessary to complete the screening, including fingerprints if required, must be disqualified for employment in such position or, if employed, must be dismissed.

(4) There is no unemployment compensation 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, 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(2), F.S.

" Employee " means any person required by law to be screened pursuant to this chapter.

This Statute or Rule is not met as evidenced by:
Based on the administrator interview, the facility failed to ensure the relief staff member had a background screening before providing personal care services and having access to resident's living areas.

Findings include:

1)During an interview on . . . . at 10:07 AM ,

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AZ815	Continued From page 21 the administrator confirmed staff member did not have a background screening unless she had somewhere else. Unclassified	AZ815		

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

. 2012

Administrator
Hammack's Retirement Home
4919 Hammack Road
Vernon, FL 32462

Dear Administrator:

Re: CCR #2012008956

This letter reports the findings of a state licensure survey that was conducted on . 2012 by representatives of this office.

Attached is the provider's copy of the State (3020) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after . 2012 to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyors. Should you have any questions please call me at 850-412-4540.

Sincerely,

Patricia M. Heiberg, MSW

for Donah Heiberg, M.S.W.
Field Office Manager

DH/pm
Enclosure
XG90

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