STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965700	12/18/2013
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Maple Leaf Assisted Living	24 Mead Place Stuart, FL 34997	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0008-Admissions - Health Assessment-12/18/2013
0010-Admissions - Continued Residency-12/18/2013
0054-Medication - Records-12/18/2013
0078-Staffing Standards - Staff-12/18/2013
0079-Staffing Standards - Levels-12/18/2013
0081-Training - Staff
0092-Food Service - General Responsibilitie
0093-Food Service - Dietary Standards-

Revisit Repeat Tags:
0000-Initial Comments-
0080-Training - Core & Competency Test-58a-5.0191(1) Fac
Z815-Background Screening; Prohibited Offenses-408.809, 435.02(2), 435.06

0000-Initial Comments

A Relicensure revisit survey was conducted on at Maple Leaf Assisted Living. The facility had uncorrected deficiencies at A0080 and AZ815.

0080-Training - Core & Competency Test 58A-5.0191(1) FAC

Based on employee record review and staff interview, the administrator failed to pass the CORE competency test with a minimum passing score of 75%.

The findings include:

Review of the Administrator's record on and reveals she completed 26 contact hours of CORE Training on However, competency test results could not be located within her file.

During interview conducted with the Administrator on at 8:10 AM, she stated, "I took the CORE [competency] test, but I did not pass it. I will retake it as soon as I can next year [2014]."

Class III
This is an uncorrected deficiency

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Z815-Background Screening; Prohibited Offenses 408.809, 435.02(2), 435.06

Based on employee record review and staff interview, the facility failed to obtain a new Level II Background Screening for 1 of 1 newly hired employee record reviewed (Employee D).

The findings include:

A review of employee record for Employee D was conducted on . The Background Screening status report documents Employee D was "eligible" for hire on . However, interview with Administrator on at 4:45 PM reveals Employee D was re-hired after an extended period of unemployment due to a health issue. On at 8:10 AM, the Administrator stated the dates that Employee D was unemployed was to . This timeframe for unemployment exceeds 90 days, therefore a new background screening is required for Employee D. The facility was unable to provide documentation regarding a new background screening for this employee.

This is an uncorrected deficiency

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Maple Leaf Assisted Living
24 Mead Place
Stuart, FL 34997

RE: Relicensure Revisit

Dear Administrator:

This letter reports the findings of a desk review conducted on 11/14/2013 and a relicensure revisit survey conducted at Maple Leaf Assisted Living on ..... 18, 2013 by a representative of this office. Enclosed is the provider's copy of the Statement of Deficiencies (State Form 5000-3547), which references the previously cited deficiencies that were found corrected and the uncorrected deficiencies that were identified during the revisit. **All deficiencies shall be corrected no later than , 2014.**

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 representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD
Enclosure

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