



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

██████, 2016

Administrator
Osprey Lodge
1761 Nightingale Lane
Tavares, FL 32778

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on ██████, 2016 by representative(s) of this office.

Enclosed is the provider's copy of the State (5000-3547) 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. **Please attach a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents to the Field Office no later than ██████, 2016.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiencies identified on your survey, which may include a desk review or onsite revisit.

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 surveyor(s). Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

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**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/06/2016
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968349	(X3) DATE SURVEY COMPLETED 06/22/2016
NAME OF PROVIDER OR SUPPLIER OSPREY LODGE	STREET ADDRESS, CITY, STATE, ZIP CODE 1761 NIGHTINGALE LN TAVARES, FL 32778	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 Initial Comments

An announced Extended Congregate Care (ECC) monitoring was conducted on [REDACTED] at Osprey Lodge, an assisted living facility in Tavares, FL, License #12259. Licensure deficiencies were found at the time of the survey.

Z815 Background Screening: Prohibited Offenses

Based on record review, interview, and policy and procedure review, the facility failed to secure a level two background check for 1 of 3 sampled employees (Staff A), who had a documented 90 day break in service.

Findings:

[REDACTED] review of Staff A's employment record showed Staff A was hired on [REDACTED] as a Certified Nursing Assistant (CNA). Further review showed Staff A had a Level II Background Screen completed on [REDACTED]. Review of Staff A's employment application showed the employee was last employed by a skilled nursing facility from [REDACTED] through [REDACTED]. There was no employment listed after [REDACTED].

During an interview on [REDACTED] at 12:29 PM with the Director of Nurses (DON), she stated there is a break in employment of almost two years for the employee, Staff A. The DON stated, "I wasn't working here then." She stated Staff A's application shows her prior position ended in 2012. The DON stated, "I am going to check the clearing house and see if there was a background screen done since." After checking the background screening clearing house, at 2:32 PM, the DON stated there has not been an updated background screen done for Staff A.

During an interview on [REDACTED] at 12:49 PM with the Administrator, she stated, "I understand the background screens need to be done after a greater than 90-day break in employment." The Administrator further stated, "We are out of compliance, and it will be done."

Record review of the Policy and Procedures titled, "Employee Background Checks," showed Effective Date: [REDACTED]; Date Revised: [REDACTED]; 1. Osprey Lodge will run level 2 criminal background checks on all prospective employees prior to hiring per state regulations.

Unclassified