STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966697	**12/22/2016**
NAME OF PROVIDER OR SUPPLIER **BRENNITY AT VERO BEACH(THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **7975 17 LANE** **VERO BEACH, FL 32966**	

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

0000 - Initial Comments

A Complaint Investigation, CCR #2016012983 and #2016013310 was conducted on 12/21/2016 and 12/22/2016 at The Brennity at Vero Beach, license # 10830. The facility had deficiencies at the time of the investigation.

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Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on record review and interviews, the facility failed to ensure employees with a Level II Background Screening conducted prior to being hired did not have a 90-day break in employment prior to their hire date for 1 of 3 sampled Employees (C).

The findings included:

Review of employee records was conducted with the facility's Administrator present. The following concern was identified:

Employee C, was hired on . Employee C's Level II Background Screen documented an eligible date of / , more than 3.5 years prior to her hire at this facility. Further review of her employee record revealed no documentation showing if she was employed in a position that requires Level II Background Screening for the 90-days prior to being hired at this facility.

In a telephone interview conducted at 4:34 PM with the facility's Resident Services Director present, Employee C was asked and stated she was unemployed for one year prior to being hired at this facility. There was no documentation showing facility staff obtained an updated Level II Background Screen as Employee C was unemployed for more than 90 days prior to her hire at this facility.

This was discussed on at 4:52 PM with the Administrator. He confirmed Employee C provides direct care to the facility's residents and that last employment prior to working at this facility was .

Unclassified

RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

, 2017

Administrator
The Brennity At Vero Beach
7975 17 Lane
Vero Beach, FL 32966

RE: CCR #2016012983 AND #2016013310

Dear Administrator:

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

Attached 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 , 2017.** 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 representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD/dso
Enclosure
XG90

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