STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963906	**04/06/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE SOUTHSIDE	**9601 SOUTHBROOK DRIVE JACKSONVILLE, FL 32256**

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

0000 Initial Comments

On , , 2017 a biennial relicensure survey with Limited Nursing Services was conducted at Brookdale Southside Assisted Living (License #7464). Deficient practice was identified during the survey.

0078 Staffing Standards - Staff

Based on document review and staff interview the Facility failed to provide evidence of freedom from documented annually for 3 of 4 employees reviewed (employees B, C, and D).

The findings Include:

The file of Employee B with a hire date of contained evidence of annual testing for performed on that expired on . Freedom from ( ) must be documented on an annual basis.

The file of Employee C, with a hire date of contained evidence of annual testing performed on that expired on .

The file of Employee D, with a hire date of contained evidence of annual testing performed on that expired on .

During an interview with the Administrator on at 1:50 PM she agreed the annual testing for Employees B, C, & D were outdated and a new test was needed.

Class III