

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/28/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967032	(X3) DATE SURVEY COMPLETED 06/08/2017
NAME OF PROVIDER OR SUPPLIER LITTLE HAVANA HHC	STREET ADDRESS, CITY, STATE, ZIP CODE 100 TAMiami CANAL ROAD MIAMI, FL 33144	

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

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS

Based on record review and interview the facility failed to ensure that hired staff that had a break in service of more than 90 days in a position that requires screening by a specified agency submit a new level II background screening prior to start working for one out of 5 sampled staff (Staff C).

Findings included:

Review of Staff D's record (hired on) revealed that her level II background screening was dated . Staff D's employment application stated that she worked at an assisted living facility from to .

Staff C stated at 10:35 am that she went to school from to and when she finished the school she went to work as private aide at the client home where she did not need the level II background screening. She stated that she thought that her background screening was still good.

Unclassified

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0000 - Initial Comments An Abbreviated Biennial Survey was conducted on . Little Havana Hhc. (License # 11114) with Limited Nursing Services and Limited Mental Health components had a deficiency identified at the time of the survey:		