STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968435	**06/22/2017**
NAME OF PROVIDER OR SUPPLIER **SOMERSET COMMUNITY**	STREET ADDRESS, CITY, STATE, ZIP CODE **34731 CHANCEY RD** **ZEPHYRHILLS, FL 33541**	

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

0000 - Initial Comments

Assisted Living Facility

An unannounced Extended Congregate Care (ECC) monitoring visit was conducted on .

The Somerset Community, Assisted Living Facility, License # 12425, had deficiencies at the time of the visit.

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on records review and interviews, the facility failed to maintain documentation of Level 2 background screening on file for 3 of 3 employees (Staff A, B, C).

Findings included:

A review of the employee records at 11:30 am on revealed that none of the 3 employees in the facility had a copy of the Level 2 background screening on file. In an interview at 11:30 am, Staff A, who was acting as administrator on was unable to provide evidence of Level 2 background screening documents for the administrator, Staff A or Staff B.

At 11:35 am, an online records review at the AHCA Level 2 background screening website revealed that the administrator was eligible and that Staff A was eligible . The online record review revealed that Staff B was not eligible, the site said "NOT ELIGIBLE - NEEDS RESCREENING."

In an interview with the owner of the facility at 11:40am, via phone, the owner stated the facility would ensure that copies of all 3 employees would be placed in the staff records as soon a possible.

Class III

E203 - ECC - Staffing Requirements - 58A-5.030(4) FAC

Based on records review and interviews, the facility failed to contract the services of a qualified nurse to be available to provide extended congregate care (ECC) nursing services for one (Staff D) of one

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contracted staff reviewed.

Findings included:

The facility has a current ECC license and a review of the facility's ECC binder, on at 11:00am, revealed a current copy of a nursing license for an RN nurse. Staff A, who was acting as administrator in the administrator's absence, stated that this RN nurse visits the facility on a regular basis. At the time of the survey the facility had no residents receiving ECC services. Upon further record review, there was no contract with this RN nurse to provide ECC services, as needed, found in the file and no Level 2 background screening eligibility documentation. At 11:10am, an online records review at the AHCA background screening website further revealed that there was no background screening eligibility on file for the nurse that Staff A stated was visiting the facility on a regular basis.

At 11:30am on , in an interview with the owner of the facility, via phone, the owner stated that he would get a contract drawn up with a qualified nurse to provide ECC services and have it signed as soon as possible.

Class III

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

Based on records review and interview, the facility failed to register employees on the Florida State background screening clearinghouse for 3 of 3 employees (Staff A, B & C).

Findings included:

On , prior to a survey, a review of the facility background screening clearinghouse roster was attempted, however it was discovered that there were no employee names on the roster.

On , at 11:30am in an interview with the owner of the facility, via phone, it was discussed that the facility did not have any employees registered on the AHCA background screening clearinghouse roster. The owner of the facility was unaware that there was a requirement to register employees on the state background screening clearinghouse. The facility currently employed 3 people, including the administrator who was out on medical leave at the time of the survey. In the interview, the owner of the facility stated that the facility would contact AHCA and have all of the employees registered on the clearinghouse website as soon as possible.

Unclassified

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

Based on observations, records review and interviews, the facility failed to ensure that an employee providing direct care to residents met eligibility requirements for 1 of 3 employees (Staff B).

Findings included:

On from10:30 am until 11:30 am, Staff B was observed in the facility kitchen preparing food and going in and out of resident's attending to residents with ADL assistance. There were 3 residents in the facility and Staff B was observed assisting all 3 residents during this period of time.

A review of Staff B's records on at 11:00 am revealed that Staff B was was hired on and given a job title of "patient care aide". There was also a job description on file in Staff B's file, signed by

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Staff B on , that indicated Staff B would be providing direct care to residents in the facility (photographic evidence provided). There was no level 2 background screening documentation in the file. At 11:15 am, an online search at AHCA's background screening website revealed Staff B was not eligible to be working around people, as the record stated that Staff B was "Not Eligible-Needs Rescreening".

Staff A, the acting administrator, was questioned regarding Staff B's lack of having level 2 background screening eligibility. Staff A was not aware that Staff was not eligible to work directly with residents.

In an interview via phone with the owner of the facility at 11:30 am, the owner stated unawareness that Staff B was not eligible to work directly with residents and that the facility would send Staff B home right away. The owner stated that the facility would send Staff B to go for a Level 2 background screening as soon as possible and would not allow Staff B to return to work until eligibility could be demonstrated.

Unclassified