STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968878	**08/10/2017**
NAME OF PROVIDER OR SUPPLIER **HIBISCUS PALACE ASSISTED LIVING FACILITY, LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1755 14TH AVE N** **LAKE WORTH, FL 33460**	

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

0000 - Initial Comments

On an unannounced Assisted Living Facility relicensure survey was conducted at Hibiscus Palace Assisted Living, (LIC.#12718). A deficiency was found at the time of the visit.

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

Based on interview and record review the facility failed to obtain a Level II background screening, for 1 of 1 direct care staff (Staff B).

Findings:

In an interview on at 12:00pm with Staff B, she confirmed she is a direct care staff for Residents #1,2,3,4 and 5 and has been working at the facility since . She stated her duties include assistance with medication, meal preparation and serving, transportation for the residents and bathing and . She stated she has not completed a Level II background check since she started working at the facility. She stated she completed a Level II background check from her previous employer. However, there was more than a 90 day gap in service before starting employment at this facility.

In an interview on at 10:00 am with the Administrator, she confirmed that Staff B has been assisting with medication, preparing and serving meals, and bathing and for Residents #1,2,3,4 and 5. She also confirmed Staff B did not complete a Level II background screening prior to starting employment and had more than a 90 day gap from the previous employer. She also confirmed Staff B has been employed at this facility since .

During a review of records on of Staff B, it revealed Staff B did not complete a Level II background screening prior to employment and there was over a 90 day gap between employment.

Unclassified