

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968802	(X3) DATE SURVEY COMPLETED R 07/26/2017
NAME OF PROVIDER OR SUPPLIER GOOD NEWS ALF, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 1220 NE 116TH ST MIAMI, FL 33161	

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

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

Based on record review and interview, the facility failed to ensure that one out of four sampled staff was are registered on the facility's roster in the Background Screening Clearinghouse database (Staff D).

Finding included:

A review of the facility's roster in the Background Screening Clearinghouse database showed that Staff D (hired) was not listed.

On at 2:00 PM, the Administrator, via telephone, acknowledged that Staff D was not listed on the roster.

Uncorrected
Unclassified

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

Based on record review and interview the facility failed to provide documentation of an eligible level II background screening for one of four sampled staff (Staff D).

Findings included:

On at 11:30 AM, Staff D (hired) was found alone with a census of six residents. Staff D was observed in the kitchen throughout survey-cooking residents' lunch. Staff D was observed serving meals, cleaning the dishes and interacting with residents. On at 12:00 PM Staff D unlocked the medication door and assisted Resident #4 with her medication.

A review of the Background Screening Clearinghouse Database showed that the result for Staff D stated "Screening In Process".

On at 2:15 PM, the Administrator, via telephone, acknowledged that Staff D did not have an eligible Level II Background Screening.

Unclassified

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 08/29/2017
FORM APPROVED

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0000 - Initial Comments A Biennial Survey Second Revisit was conducted on 07/26/2017. Good News ALF, LLC with a Limited Mental Health component (license 12666) had deficiencies found at the time of the survey: 0160 - Records - Facility - 58A-5.024(1) FAC Based on record review and interview, the facility failed to provide documentation of the Comprehensive Emergency Management Plan (CEMP) approval. Findings included: Record review revealed the facility did not have documentation of an approved Emergency Management Plan. Staff D showed documentation of a receipt indicating the plan was submitted on On at 1:00 PM, the Administrator via telephone stated he submitted the CEMP and has the receipt but the facility has not received an approval letter. Uncorrected Class III 0165 - Risk Mgmt & QA; Adverse Incident Report - 429.23(1-4 & 6-10) FS; 58A-5.0241 FAC Based on observation, record review, and interview the facility failed to report an initial adverse incident report within one day for one of six sampled residents (#7). Findings included: Record review showed that there was no documentation of the facility completing a 1 Day Adverse Incident Report with the AHCA (Agency for Health Care Administration) after Resident #7 left the facility on and never returned. On at 1:00 PM, the Administrator, via telephone, verified he still had not reported incident to the agency. Uncorrected Class III		