| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | **AL11967243** | **12/26/2017** |
| NAME OF PROVIDER OR SUPPLIER<br>**HOME SWEET HOME ASSISTED LIVING** | STREET ADDRESS, CITY, STATE, ZIP CODE<br>**6981 COOLIDGE STREET**<br>**HOLLYWOOD, FL 33024** | |

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

**0000 - Initial Comments**

An unannounced Extended Congregate Care monitoring survey was conducted on at Home Sweet Home Assisted Living, License # 11301. The facility had deficiencies at the time of the visit.

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

Based on interview and record, review the facility failed to ensure that the Level II Background prescreening under Chapter 435 was conducted within 5 years of continuous employment in the Assisted Living Facility (ALF), for 1 of 3 sampled Staff records revived (Staff B).

The findings included:

On an employee record review was conducted for Staff B. The employment record revealed Staff B was hired to work as a Home Health Aide (HHA), direct caregiver to Resident's in the facility. Further review of the employment record revealed that the most recent Level II Background Screening was conducted on . As indicated Under chapter 435, the facility failed to ensure that the prescreening and attestation was conducted on or before as a condition of retaining continuous employment in the facility.

On at 03:30 PM, an interview was conducted with the Administrator of the facility. She acknowledged the findings and indicated that she would ensure that Staff B would obtain the Level II Background Screening requirements as soon as as possible. She further went on to say that she had reminded the Staff, but failed to follow-up.

Unclassifed