

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/18/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967568	(X3) DATE SURVEY COMPLETED 01/09/2018
NAME OF PROVIDER OR SUPPLIER ALF AT OCEAN BREEZE GARDENS	STREET ADDRESS, CITY, STATE, ZIP CODE 500 LEE AVE SATELLITE BEACH, FL 32937	

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

0000 - Initial Comments

A Complaint Investigation #2017011906 was conducted on . ALF at Ocean Breeze Gardens Assisted Living (License# 11569) had a deficiency at the time of the visit.

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

Based on review of the Background Screening (BGS) Clearinghouse Employee Roster and interview the facility failed to report and update a change of status of employment for 1 of 6 sampled staff (E) on the Employee Roster as required within 10 business days.

Findings:

On at 7:20 PM, a review of the BGS Clearinghouse Employee roster revealed that staff E was still employed and included on the Employee roster.

An interview on at 7:30 with the Lead caregiver & designee for the Administrator stated that staff E last day was on due to illness and will not be returning. Furthermore, she confirmed the finding and stated it was an oversight.

Unclassified