

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/26/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910546	(X3) DATE SURVEY COMPLETED 01/10/2018
NAME OF PROVIDER OR SUPPLIER VARNUM'S REST HOME LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 12167 NW FREEMAN ROAD BRISTOL, FL 32321	

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

0000 - Initial Comments

An unannounced Limited Nursing Services monitoring survey was conducted at Varnum's Rest Home assisted living (license #6026) located in Bristol, FL on Deficient practice was identified at the time of the survey.

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

Based on record review and staff interview, the facility failed to update the employee roster in the Background Screening Clearinghouse within 10 business days of hire for 1 of 3 sampled employees. (employee B)

The findings included:

Review of employee B's (caregiver) file revealed a hire date of and a level 2 background screen clearinghouse eligible dated Review of the Background Screen roster for the facility revealed employee B was not added to the roster as of

An interview was conducted with the facility manager on at approximately 12:35 PM. The manager observed the roster on her computer and confirmed employee B was not on the roster.

The employee was added to the roster while this surveyor was still onsite.

Unclassified