STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968985	**02/07/2018**
NAME OF PROVIDER OR SUPPLIER **CARMITA'S ASSISTING LIVING FACILITY LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1103 MARSCASTLE AVE** **ORLANDO, FL 32812**	

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

0000 - Initial Comments

The re-licensure survey was conducted on . Carmita's Assisting Living LLC, license # 12807 had deficiencies at the time of the survey.

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on record review and interview, the facility failed to ensure a face-to-face medical examination was conducted for 1 of 2 sampled residents (#5) who experienced a significant change, and that an interdisciplinary care plan was developed.

Findings:

Resident record review for resident # 5 revealed an updated health assessment report dated and was admitted to hospice on . The review revealed no evidence to confirm that a revised (new) health assessment was obtained when she was admitted to hospice in , 2017, which was a significant change. Continued review revealed no evidence to confirm that an interdisciplinary care plan, which specified the services provided by hospice and those, provided by the facility, was developed and implemented by a licensed hospice in consultation with the facility.

In an interview with the administrator on at 3:45 PM who said, the interdisciplinary plan was not available and there was no updated Health Assessment when the resident was place on hospice.

Class III

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review and interview the facility failed to ensure freedom from ( ) was documented annually for 1 of 4 sampled staff (D).

Findings:

Personnel record review for staff D, hired revealed a negative test result dated . There no evidence she obtained freedom from annually thereafter.

In an interview with the administrator on at 3:45 PM who said, the staff did not have a new test result.

Class III

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0181 - Emergency Plan Approval - 58A-5.026(2) FAC

Based on interview the facility failed to submit the Comprehensive Emergency Plan (CEMP) to the local emergency management within 30 of obtaining the initial licensure and yearly thereafter.

Findings:

In an interview with the administrator on . . . . . at 10 AM, who said that the facility's CEMP was never approved by the local emergency management office, since licensure in 2016. He explained the plan was submitted and it needed revisions. However, time passed on and it was not followed up on. .

There was no evidence to confirm the plan had been submitted and approved.

Class III

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

Based on record review and interviews the facility did not maintain an employee roster on the Agency's Background Screening (BGS) Clearing House that listed all the facility employees subject to a background screening for 1 of 4 sampled employees (B).

Findings:

In an interview with staff B on . . . . . at 11:30 AM, who said she started working at the facility about 3 weeks ago.

Personnel record review staff B revealed a hire date of .

Review of the facility's Background Screening Clearing House roster on at revealed the facility employee roster did not list staff B.

In an interview with the administrator on . . . . . at 3:45 PM who said, he overlooked the roster, as the staff also worked at another one of his facilities.

Unclassified

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

Based on facility interview and record review and the facility failed to ensure 1 of 4 staff (C), who is a role

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that requires a background screening did not have any disqualifying offenses and allowed the staff to continue to work without a current screening.

Findings:

In an interview with staff C on . . . . . at 11:30 AM, who said she started working at the facility about a year ago.

Personnel record review staff C revealed a hire date of . The continued review revealed a job application that indicated she last worked in a private home and provided care to an elderly person. The review revealed a background screening result dated .

On at 10 AM the Agency's background screening website did not list the staff's previous employment history with an AHCA licensed facility. There was no evidence to confirm that staff C was still eligible to work with the elderly population.

In an interview with the administrator on at 3:45 PM who said, he did not realize that the staff needed a new background screening.

Unclassified