STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964374	C **03/14/2018**
NAME OF PROVIDER OR SUPPLIER **HAMPTON ALF AT 24TH ROAD LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1500 S.E. 24TH ROAD** **OCALA, FL 34471**	

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

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

Based on interview and record review, the facility failed to updated the employee roster listed on the Background Screening Clearinghouse for 3 of 5 staff records reviewed.

Findings:

A review of the Employee List provided by the facility on 3/14/18 showed the following employees and hire dates:
Staff B, Date of hire 1/5/18
Staff C, Date of hire 2/3/18
Staff D, Date of hire 2/11/18

A review of the Employee Roster on the Background Screening Clearinghouse on 3/14/18 showed that Staff B, C and D were no added to the employee roster within 10 days of date of hire.

An interview was conducted with the Administrator on 3/14/18 at 6:10 PM confirmed Staff B, C and D were no listed on the employee roster on the Background Screening Clearinghouse.

Unclassified

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964374	C 03/14/2018
NAME OF PROVIDER OR SUPPLIER **HAMPTON ALF AT 24TH ROAD LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1500 S.E. 24TH ROAD** **OCALA, FL 34471**	

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

0000 - Initial Comments

An unannounced complaint survey (CCR 2018001570 and CCR 2018001805) was conducted on 14, 2018 at Hampton Manor at 24th Road Assisted Living Facility (License #8926) in Ocala, FL. Deficient practice was identified at the time of the survey.

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interview, the facility failed to ensure maintenance repairs to resident were completed in 4 of 18 observed during initial tour.

Findings:

A tour was conducted starting at 9:50 AM on . The following were included in the tour: 108, 109, 110, 112, 115, 117, 118, 128, 129, 130, 131, 132, 135, 136, 141, 142, 143, and 144. had a brown colored stain on the floor behind the toilet, had wall damage to the right of the , the had black colored debris on it and the shower floor was littered with white debris. had a hole in the floor near the wall at the head of the resident's bed. was missing the transition strip between the , leaving an uneven gap on the floor at entrance of (Photographic evidence was obtained).

An interview conducted with the Nurse Care Manager on at 10:20 AM confirmed these environmental concerns during the tour.

Class III

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

Based on interview and record review, the facility failed to updated the employee roster listed on the Background Screening Clearinghouse for 3 of 5 staff records reviewed.

Findings:

A review of the Employee List provided by the facility on showed the following employees and hire dates:
Staff B, Date of hire
Staff C, Date of hire

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964374	C **03/14/2018**
NAME OF PROVIDER OR SUPPLIER **HAMPTON ALF AT 24TH ROAD LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1500 S.E. 24TH ROAD** **OCALA, FL 34471**	

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

Staff D, Date of hire

A review of the Employee Roster on the Background Screening Clearinghouse on showed that Staff B, C and D were no added to the employee roster within 10 days of date of hire.

An interview was conducted with the Administrator on at 6:10 PM confirmed Staff B, C and D were no listed on the employee roster on the Background Screening Clearinghouse.

Unclassified