STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11943141	R **05/02/2018**
NAME OF PROVIDER OR SUPPLIER **ELZAIDA'S TENDER CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **804 SOUTH BELCHER ROAD** **CLEARWATER, FL 33764**	

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

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

Based on record review and interview the facility failed to maintain an up to date background screening roster and list all staff working in the facility.

Findings included:

During a survey on , review of the background screening roster for the facility revealed that Staff A who was in charge of the care and supervision for 3 of 3 residents on the day of this survey was not listed on the roster.

The owner stated on at 1:30pm that Staff A was not an employee and just comes to stay with the residents when she has an appointment.

Unclassified

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
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SUMMARY STATEMENT OF DEFICIENCIES
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0000 - Initial Comments

Assisted Living Facility

On a second revisit at Elzaida's Tender Care, Assisted Living Facility, was conducted.
At the time of the visit, the facility had deficient practice.

(License # 7280)