STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966266	**05/21/2018**
NAME OF PROVIDER OR SUPPLIER **CANTERBURY DREAMS**	STREET ADDRESS, CITY, STATE, ZIP CODE **675 CANTERBURY RD** **CLEARWATER, FL 33764**	

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

0000 - Initial Comments

Assisted Living Facility

On , 2018, a abbreviated biennial relicensure survey was conducted at Canterbury Dreams (Lic. #10506). Deficient practice was identified during the survey.

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

Based on record review and interview, two of two staff sampled (A; B) had not obtained documentation regarding a negative ( ) examination on an annual basis.

Findings include:

A personnel file review during the survey revealed that Staff A had a statement indicating they were free from communicable dated and no specific annual statement indicating freedom from .
The last evaluation for Staff B had expired .

Interview with the administrator at 11:30am on provided no clarification for these oversights.

Class III

0180 - Emergency Management - 58A-5.026(1) FAC

Based on record review and interview, the facility had no evidence of having prepared a written comprehensive emergency management plan in accordance with requirements of rule.

Findings include:

At 10:10am on , the facility's emergency management plan was requested but never furnished.

Although a copy of the facility's "emergency power plan" was provided, the administrator explained on

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SUMMARY STATEMENT OF DEFICIENCIES
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that same date at 10:15 AM that "he couldn't find any copies" of his emergency management plan for inspection.

Class III

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

Based on record review and interview, the facility had no documentation of having sent a copy of its emergency management plan to the local emergency management agency for review and approval.

Findings include:

At 10:10am on . . . . . , the facility's most recently approved emergency management plan was requested but never furnished throughout the inspection.

Although the administrator presented a copy of the facility's emergency power plan that had been received by the local emergency management agency . . . . . , further administrative documentation review found no evidence verifying that the facility's emergency management plan had been submitted. This was confirmed during the same interview noted above.

Class III

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SUMMARY STATEMENT OF DEFICIENCIES
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Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on record review and interview, the facility had not recorded at least one (1) employee with the clearinghouse, nor had it maintained the employment status of all its current/former staff with said clearinghouse, reporting all changes in status within 10 business days.

Findings include:

Interview with the administrator at 11am on . . . . indicated that the only employees who worked at the facility were him, Staff A, and his assistant caregiver, Staff B (hired).
Review of the background screening clearinghouse roster found a list that included Staff A as well as the owner and another employee. In addition, under "screening requests," this same employee was listed, as well as the primary owner, and a different staff person.
Neither the screening roster nor the screening request list contained the name for Staff B.

Interview with the administrator at 11:10am on . . found that he had not updated the background screening roster and that "he did not know that he was supposed to do so" once he had terminated and/or hired anyone subject to Level 2 screening requirements.

Unclassified

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

Based on record review and interview, one of two staff sampled (B) did not have a completed Level 2 background screening report available for inspection.

Findings include:

A personnel record review revealed that although Staff B was hired as a caregiver , further review of his file found no documented evidence of a completed Level 2 background screening report. Instead, the statement, "agency review required" had been generated as the results.

Interview with the administrator at 11:45am on . . . . produced no clarification.

UNCLASSIFIED