

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969082	(X3) DATE SURVEY COMPLETED 06/28/2018
NAME OF PROVIDER OR SUPPLIER BEEHIVE HOMES OF GULF BREEZE	STREET ADDRESS, CITY, STATE, ZIP CODE 4702 GULF BREEZE PKWY GULF BREEZE, FL 32563	

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

0000 - Initial Comments

An unannounced biennial standard survey was conducted on 06/28/2018 at Beehive Homes of Gulf Breeze (license #12891). An initial extended congregate care and increased capacity survey (application #70726) was conducted in conjunction. Deficiencies were found with the biennial at the time of the survey.

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

Based on staff interview and record review, the facility failed to ensure the facility's comprehensive emergency management plan (CEMP) was submitted to the local emergency management office for annual approval.

The findings included:

A review of the facility's CEMP was conducted, revealing an approval date of 06/28/2018 by the local emergency management office. The letter indicated the facility should submit their next review in the spring of 2018. No approval letter for the CEMP could be located for 2018. An interview was conducted with the facility Administrator, [redacted], at approximately 11 AM. She stated the CEMP was not submitted to the local emergency management officials for approval until 07/18/2018.

Class III

2814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on interview and staff record review, the facility failed to ensure all employees were listed on the facility's background screening clearinghouse roster, for 1 of 6 employees reviewed, caregiver E.

The findings included:

A list of all employees of the facility was provided by the Administrator. A review of the background screen clearinghouse website roster completed by the facility revealed the absence of caregiver E. An interview was conducted on 07/18/2018 at 11:45 AM with the Administrator who confirmed caregiver E worked at the facility and was both a resident caregiver and a medication technician. Further review of caregiver E's employee file revealed a level 2 background screen indicating the caregiver was "not eligible" to work in the facility.

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/18/2018
FORM APPROVED

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SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
Unclassified Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS Based on interview and record review, the facility failed to ensure staff found to be "not eligible" on a level 2 background screen had no resident contact until an exemption could be granted by the agency, for 1 of 6 staff reviewed, caregiver E. The findings included: Caregiver E was hired as a resident caregiver/medication technician Caregiver E's employee file revealed a delinquent/active certified nurse aid (CNA) certification with an expiration date The level 2 background screen completed indicating the caregiver was determined to be "not eligible" for employment with any Medicaid, Medicare, nor AHCA providers. Further review of caregiver E's file revealed a Department of Health (DOH) exemption letter dated The exemption letter stated no disqualifying offense existed and the employee could work as a CNA but must contact AHCA for any information that may be needed. An interview was conducted on at 12:25 with the nurse consultant and the Administrator who both confirmed they were aware of the "not eligible" background screen and indicated it was their understanding the employee was eligible to work since an exemption letter had been granted by DOH. An interview was conducted with an employee from the background screening unit of AHCA on at 9 AM who confirmed since the caregiver's CNA certification was delinquent, the DOH exemption letter no longer applied. Further, the staff member was not eligible to work until an exemption was granted by AHCA. No application for exemption existed for caregiver E. Unclassified		