STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11943052	**08/03/2018**
NAME OF PROVIDER OR SUPPLIER **ANGEL'S TOUCH**	STREET ADDRESS, CITY, STATE, ZIP CODE **2446 NURSERY ROAD** **CLEARWATER, FL 33764**	

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

Z813 - Results of Screening & Notification In File - 59A-35.090(3)(c), FAC

Based on record review and interview, the eligibility results for one of two staff sampled (A) who had obtained screening reports, were not available in the employee's personnel file.

Findings include:

Although an online search of the background screening system found an "eligible" result for the administrator, review of this individual's personnel file during the inspection found no physical copy of this report available.
Interview with the administrator at 2pm on provided no clarification or explanation for the missing documentation.

Unclassified

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

Based on record review and interview, the administrator had not added at least one of three staff sampled (C) to the background clearinghouse.

Findings include:

A review of the facility's current staff schedule found regularly scheduled shifts for Staff C providing direct care to residents, including when Staff C was the only person on duty in the facility.
Interview with the administrator at 10:45am on revealed that "(Staff C) worked as a volunteer 3-4x/week." A review of the facility's background screening roster found no entry for Staff C. Interview with the administrator at 2:10pm on provided no explanation other than "I thought that if you were a volunteer, you didn't have to be included on this type of document."

Unclassified

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

Based on record review and interview, the facility had not ensured that one of three staff sampled (C) who were subject to background screening requirements had undergone Level 2 background screening.

Findings include:

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SUMMARY STATEMENT OF DEFICIENCIES
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A personnel file review during the _____ inspection indicated that Staff C, hired as caregiver 2010, had no documented evidence verifying a Level 2 background screening had been conducted on this employee. Interview with the administrator at 2:10pm on _____ revealed that "she never ran a Level 2 screening on this employee because she had hired him as a volunteer and she thought volunteers did not need to be Level 2 background screened."

Unclassified

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SUMMARY STATEMENT OF DEFICIENCIES
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0000 - Initial Comments

Assisted Living Facility

On , an abbreviated biennial relicensure survey was conducted at Angel's Touch (Lic. #6665). At the time of the survey, Angel's Touch had deficient practice.

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

Based on record review and interview, one of three staff sampled (C) who had been employed at least 30 days had not obtained a written statement from a health care provider pertaining to their freedom from communicable based on an examination within the last 6 months, nor had Staff C's freedom from ( ) been documented on an annual basis.

Findings include:

Personnel file review during the survey revealed that Staff C, hired as a volunteer providing direct care part time since 2010 according to the administrator, had no official evaluation from a health care provider (physician; physician's assistant; nurse practitioner) regarding his freedom from signs/symptoms of communicable , nor did Staff C have any current documentation of status within the last year. Interview with the administrator at 12:45pm on indicated that she didn't have this documentation because "(Staff C) was a volunteer and she thought a volunteer was not subject to these requirements."

Class III

0082 - Training - / - 58A-5.0191(4) FAC

Based on record review and interview, one of three staff sampled (C) had not received the one-time course on and within 30 days of employment.

Findings include:

A staff file review during the inspection revealed that Staff C, hired 2010, had no documented evidence of having taken the and class. Interview with the administrator at 1:25pm on

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SUMMARY STATEMENT OF DEFICIENCIES
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provided no explanation for this oversight.

Class III

0083 - Training - First Aid and - 58A-5.0191(5) FAC

Based on record review and interview, one of three staff sampled who was scheduled alone in the facility when residents were present did not have current First Aid training.

Findings include:

A personnel record review during the survey found that Staff C, scheduled on the midnight shift alone on Wednesday and Thursday nights, as well as weekend relief during the day and evening, had no official certification verifying he had taken First Aid training. Interview with the administrator at 1:20pm on provided no clarification for this discrepancy.

Class III

0091 - Training - Documentation & Monitoring - 58A-5.0191(12) FAC

Based on record review and interview, the facility failed to issue training certificates containing required documentation to one of three staff sampled (C).

Findings include:

A personnel record review during the survey indicated that Staff C (hired part time in 2010) had training in the following areas: a) elopement policies/procedures; b) policies/procedures; and c) assisting residents with self-administration of medication. Upon further review of these certificates, none of them indicated how many contact hours each training program was for.
Interview with the administrator at 1:30pm on provided no clarification regarding Staff C's level of training.

Class III