STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910479	R 02/06/2019
NAME OF PROVIDER OR SUPPLIER **MARYLAND MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **7632 MARYLAND AVENUE** **HUDSON, FL 34667**	

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

0000 - Initial Comments

Assisted Living Facility

A second revisit to a complaint (CCR 2018015039 and 2018012792) was conducted at Maryland Manor on in conjunction with a third revisit to an monitoring visit for facility temperature and physical plant conditions. Maryland Manor had deficiencies at the time of the visit.

(License #7165)

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

Based on record review and interview, the facility failed to maintain the employment status of staff members within the employee roster listed in the AHCA background screening clearinghouse (Employee Roster), within 10 business days of initial employment and ending employment, for five (Staff A, Staff B, Staff C, Staff D and Staff E) of five employee records sampled.

Findings included:

The Administrator was interviewed at 9:39 AM on concerning entering Staff A in to the Employee Roster. The Administrator stated that they had not entered Staff A in to the Employee Roster. During an interview previously conducted with the Administrator at 10:36 AM on , they stated that Staff A, a caregiver, started employment about a month prior ( ).

During the same interview conducted at 10:36 AM on , the Administrator had stated that Staff B and Staff C ended employment about seven months prior (,). The Administrator also stated that Staff D left employment more than a month prior to and Staff E left ended their employment at the end of . A review of the Employee Roster on showed that Staff B, Staff C, Staff D, and Staff E still had no ending dates of employment.

During the interview with the Administrator at 9:39 AM on , they acknowledged that the Employee Roster was not up-to-date for Staff A, Staff B, Staff C, Staff D and Staff E. They stated that they were not able to gain access to the Employee Roster and that the Owner of the facility needed to assist them to gain access as required.

Unclassified

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

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

Based on record review and interview, the facility failed to provide proof of a current Level 2 background screening showing eligibility to work in an assisted living facility (ALF), for a direct care staff member that had access to residents' living areas, for one (Staff A) of one employee records sampled.

Findings included:

The Administrator was interviewed at 9:17 AM on and was asked for proof of a current Level 2 background screening for Staff A. The Administrator stated that there was no Level 2 background screening on file.

Staff A was previously interviewed in the presence of the Administrator at 10:54 AM on . Staff A stated at that time that they had worked at another ALF from until . Staff A stated that they hadn't worked since , until they accepted a position at this ALF.

A review of the AHCA background screening house with the Administrator during the interview conducted at at 9:17 AM showed Staff A's last Level 2 background screening with the eligibility date of . The Administrator acknowledged that Staff A had more than a 90 day break in service from a position that required a Level 2 background screening and had no proof that Staff A was currently eligible to work in an ALF.

Unclassified