STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966845	R **03/29/2019**
NAME OF PROVIDER OR SUPPLIER **CASA DE PAZ ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **9360 SW 24 STREET** **MIAMI, FL 33165**	

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

0000 - Initial Comments

A revisit to a biennial survey was conducted at Casa de Paz ALF Inc on . . . . . Deficiencies were identified at the time of the survey:

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

Based on record review, and interview, the facility failed to maintain an updated employee roster within the background screening clearinghouse database for three out of five (Staff E, F and G) sampled staff.

Findings included:

Review of background screening clearinghouse database showed that Staff E was not listed and Staff F and Staff G were listed. Staff E was hired on [redacted].

Interview conducted on [redacted] at 10:30 AM, Administrator confirmed that Staff F and Staff G no longer worked at the facility and that Staff E was not listed.

Unclassified
Uncorrected