STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968284	R 04/17/2019
NAME OF PROVIDER OR SUPPLIER **DANIELLA'S LIFE ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **1910 W FERN ST** **TAMPA, FL 33604**	

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

0000 - Initial Comments

A third revisit to a complaint survey was conducted at Daniella's Life an Assisted Living Facility on , , . Deficiencies were identified at the time of survey.

0080 - Training - Core & Competency Test - 429.52( ) FS; 58A-5.0191(1) FAC

Based on interview and record review, the facility's administrator failed to meet the training and testing requirements for an administrator of an assisted living facility. The administrator failed to complete the core competency exam within the required timeframe.

Findings Included:

Record review of the Administrator's personnel file on revealed there no documentation showing completion of the core competency exam was found.

During interview with the Administrator on at 10:26 am, the Administrator stated they are scheduled to take the test on but may reschedule the test to .

Class III

0081 - Training - Staff In-Service - 58A-5.0191( ) FAC

Based on interview and record review, the facility failed to ensure staff received required staff in-service training within 30 days of employment, for staff who provide direct care to residents for 1 (Staff B) of 3 employee records reviewed.

Findings included:

Employee record review conducted on revealed Staff B with a date of hire did not have Elopement response training, Emergency Preparedness and Evacuation Training, and Incident Reporting training.

An interview was conducted on at 10:45am with the Administrator. The Administrator confirmed Staff B was missing Incident reporting training, Emergency preparedness and evacuation Training, and Elopement response training.

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SUMMARY STATEMENT OF DEFICIENCIES
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Class III

0090 - Training - - 58A-5.0191(11) FAC

Based on interview and record review, the facility failed to ensure staff received ( ) training within 30 days of employment, for staff who provide direct care to residents for 1 (Staff B) of 3 employee records reviewed.

Findings Included

Employee record review conducted on revealed Staff B with a date of hire did not have proof of training in employee record.

An interview was conducted on at 10:45am with the Administrator. The Administrator confirmed Staff B was missing training.

Class III

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

Based on employee record review and interview, the facility failed to maintain an up-to-date Background Screening (BGS) Roster.

Findings Included:

Record review of the Facility's BGS Roster conducted on revealed Staff B hired on was not on the BGS Roster.

An interview with Administrator was conducted on at 10:45am. The Administrator confirmed Staff B was not on the BGS Roster.

Unclassified