AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Corrigan Place ALF, Inc
11420 Corrigan Street
Spring Hill, FL 34609

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2014 by a representative of this office.

Enclosed is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after , 2014 to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967838	03/03/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Corrigan Place Alf Inc	11420 Corrigan St Spring Hill, FL 34609	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0152 - 58a-5.023(3) Fac - Physical Plant - Safe Living Environ/other S-S= D
St - A - Z815 - 408.809, 435.02(2), 435.06 - Background Screening; Prohibited Offenses S-S= D

Specific Tag Findings:

0000-Initial Comments

On unannounced **biennial licensure** survey was conducted at Corrigan Assisted Living Facility in Spring Hill Florida. Discernible deficiencies were identified as a result of this survey. The facility was not in compliance at this time.

0152-Physical Plant - Safe Living Environ/Other 58A-5.023(3) FAC
Based on observations and interviews the facility failed to maintain a safe living environment for 6 of 6 residents, for 1, 2, 3, 4, 5, 6.

Findings:

On at approximately at 11:00 AM during a tour of the facility it was observed that the front, rear and side outside entrances all had a keyed deadbolt on the inside of the facility.

On at approximately 11:15 AM an interview was conducted with the Administrator regarding the keyed deadbolts on all three exits and if the fire department approved them. She stated that their last fire inspection was conducted on and the keyed deadbolts were not on the doors. She stated after the inspection resident #4 moved into the facility was exit seeking and they changed the deadbolts to the keyed locks.

On at approximately 1:50 PM an interview was conducted with the fire inspector of Hernando County. He was asked if the facility could have the keyed deadbolts on the facility exit doors. The inspector stated that the only way they can have keyed deadbolts was if there was a fire sprinkler system which was connected to the fire alarm system (which there was not) and if not, the facility could only have the thumb flip deadbolts on the exit doors.

Class III

Z815-Background Screening; Prohibited Offenses 408.809, 435.02(2), 435.06
Based on observations, record reviews and interviews the facility failed to have a background screening for 1 of 3 direct care staff employees (A).

Findings:

On at approximately 11:30 AM it was observed that employee A was assisting residents with the lunch meal. She assisted the residents with getting to the table and she assisted them whit getting their food by

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serving them.

On at approximately 1:40 PM an interview was conducted with employee A. During the interview she stated she provides direct care to the residents and that she is a CNA.

On during a record review it was observed that employee A had a background dated but her employment date with the facility was

On at approximately 2:35 PM the Administrator was asked if staff A had more than a 90 day break in employment, working in a health care facility since her background screening on and her coming to work for Corrigan Place on The Administrator stated that staff A had worked for the facility when she received her level II background clearence on from AHCA. Staff A then got sick and took about a year off and did not work at all. The Administrator stated she did not get another level II background screening on staff A before she came back to work for the facility, which was more then 90 days between her last employment in a health care facility.

Unclassified