

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/16/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11942911	(X3) DATE SURVEY COMPLETED 06/28/2018
NAME OF PROVIDER OR SUPPLIER BARNETT LAKEVIEW ALF INC.	STREET ADDRESS, CITY, STATE, ZIP CODE 3833 SW 33RD STREET HOLLYWOOD, FL 33023	

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

0000 - Initial Comments

An unannounced CHOW (Change of Ownership) licensure survey was conducted on _____ at Barnett Lakeview ALF Inc., License #8312. The facility had _____ deficiencies at the time of the visit.

D162 - Records - Resident - 58A-5.024(3) FAC

Based on observation, record review and interview the facility failed to ensure that a facility that has unlicensed staff assisting with self administration of medication, has a copy of the written informed consent, when not included in the resident's contract, to provide such assistance for 1 of 2 (Resident #3) resident records reviewed.

The findings included:

In an observation conducted on _____ at 2:00 PM unlicensed Staff B assisted Resident #3 with self-administration of her medications.
A record review conducted on _____ at 2:30 PM of Resident #3's record revealed that the record lacked documentation of the written informed consent for unlicensed staff to provide assistance with self administration of medications as required.

In an interview conducted on _____/18 at 2:54 PM with the Administrator and former administrator, they reviewed the file and confirmed that the informed consent for assistance with self administration of medications was not in the file.

Class III

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

Based on record review and interview the facility failed to ensure that a signed Attestation of compliance referenced in subsection 59 A-35.090(2), F.A.C., was in the employee's personnel file for 3 of 3 (Staff A, Staff B and Staff C) staff records reviewed.

The findings include:

Personnel record reviews conducted on _____ revealed that Staff A/ the Administrator, with a hire date of _____, Staff B an aide, with a hire date of _____, and Staff C an aide, with a hire date of _____ all lacked evidence of a signed Attestation of compliance in their personnel file as required.

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In an interview conducted on at 12:41 PM with the Administrator he confirmed the findings. unclassified Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS Based on record review and interview, the facility failed to ensure that staff who have a background screening conducted through the AHCA(Agency for Health Care Administration)'s Background Screening Clearinghouse, maintain initial employment status and update any changes in their current employment statuses within 10 business days through the AHCA(Agency for Health Care Administration)'s Background Screening Clearinghouse Roster, for 2 of 3 (Staff A and Staff C) staff records reviewed. The findings included: A review conducted on at 12:40 PM of the facility's current schedule revealed that Staff A, Staff B and Staff C are the only current employees. On at 12:30 PM, the AHCA(Agency for Health Care Administration)'s Background Screening Clearinghouse Roster was reviewed and reveals that the facility lists 6 current employees on the roster. Staff B is the only current staff member listed, Staff D, E, F, G and Staff H were not on the schedule but were listed on the roster. Staff A the Administrator, with a hire date of and Staff C an aide, with a hire date of were not listed on the roster and had been employed more than 10 days. In an interview conducted on at 12:50 PM with Staff H/former administrator she stated that Staff D's last day of employment was, Staff E's last day of employment was, Staff F's last day of employment was, Staff G's last day of employment she could not recall, but said it was a long time ago, she further stated that her last day of employment was, and that she is just assisting the new administrator. In an interview conducted on at 1:57 PM with the Administrator, he stated that he was unaware of the requirement and would update it as soon as possible. unclassified Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS Based on observations, record review and interview the facility failed to ensure that a new Level 2 background screening was obtained for 1 of 3 staff members (Staff B) that had a level 2 background		

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screening completed within the previous 5 years, but had a break of employment of more than 90 days. The findings included: In observations conducted on throughout the day from 11:30 AM-4:00 PM Staff B was observed, preparing lunch for the residents, assisting the residents in ambulation and going to the . In an interview conducted on with the administrator he stated that Staff B's date of hire was . A review of the facility's roster on the Background Screening website on at 12:30 PM revealed that her date of hire is . A review of Staff B's employment application dated revealed that she worked from as a cashier at a cafe. A review of the Background Screening Result provided by the facility on revealed an eligible date of , and had not obtained a new level 2 background screening since her more than 90 day break of employment from a licensed provider. In an interview conducted on at 12:30 PM with Staff B she stated that she worked at a cafe from , 2014 until , 2018. A review of the Background Screening website on at 12:34 PM revealed that Staff B had a Level 2 background screening eligible date of . In an interview conducted on with the Administrator and former Administrator they reviewed the file and acknowledged the findings. Unclassified		