Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11966425	A. BUILDING: _____ B. WING _____	R 07/08/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
INN AT ASTON GARDENS AT PELICAN POINTE (THE)	9000 IBIS WAY VENICE, FL 34292

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{A 000}	Initial Comments A follow-up by desk review was conducted on . . . . . for The Inn at Aston Gardens at Pelican Pointe, an assisted living facility in Venice Florida. The follow-up was in response to the complaint, relicensure and emergency power plan monitoring survey completed on . Based on the facility's plan of correction and supporting documentation, 6 of the deficiencies were corrected as of and 1 was recited.	{A 000}		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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CZ814	435.12(2)(b-d), FS Background Screening Clearinghouse 435.12 Care Provider Background Screening Clearinghouse.- (2)(b) Until such time as the [illegible] are enrolled in the national retained print notification program at the Federal Bureau of Investigation, an employee with a break in service of more than 90 days from a position that requires screening by a specified agency must submit to a national screening if the person returns to a position that requires screening by a specified agency. (c) An employer of persons subject to screening by a specified agency must register with the clearinghouse and maintain the employment status of all employees within the clearinghouse. Initial employment status and any changes in status must be reported within 10 business days. (d) An employer must register with and initiate all criminal history checks through the clearinghouse before referring an employee or potential employee for electronic [illegible] submission to the Department of Law Enforcement. The registration must include the employee's full first name, middle initial, and last name; social security number; date of birth; mailing address; [illegible]; and race. Individuals, persons, applicants, and controlling interests that cannot legally obtain a social security number must provide an individual taxpayer identification number. This Statute or Rule is not met as evidenced by: Based on record review and staff interview, the facility failed to ensure separation from employment was reported to the Agency for Health Care Administration (AHCA) Clearing House roster within 10 business days of separation as required for 1 (Staff B) of 1 staff sampled.	CZ814		

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CZ814	Continued From page 1 The findings included: On , record review revealed caregiver Staff B still had not been added to the (AHCA) Clearing House roster after rehire on . On at approximately 10 a.m. in a phone interview, the Executive Director said she did not add her to the roster because shortly after she came to work, she did not show up to work, so she was terminated on . Later on , record review revealed Caregiver Staff B was added to the AHCA Clearing House roster on with a date of separation for Caregiver Staff B of , 35 business days after separation from employment. On , at approximately 1:30 p.m. in a phone interview, the Executive Director confirmed Staff B was not added to the AHCA Clearing House roster until . Unclassified	CZ814		

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