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
	AL11911459	A. BUILDING: _____ B. WING _____	09/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ELANCE AT SARASOTA	3260 LAKE POINTE BLVD SARASOTA, FL 34231

(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 An unannounced change of ownership (CHOW), extended congregate care, health facility reporting system, emergency power plan, visitation monitoring and complaint survey for #2022016448 and #2023012429 was conducted on . . . . . through . . . . . at Liana of Sarasota, an assisted living facility in Sarasota, Florida. Complaint #2023010496 was substantiated without citation. Complaint #2023010496 was substantiated without citation. The following is a description of the deficiencies.	A 000		
A 078 SS=D	59A-36.010(2) FAC Staffing Standards - Staff (2) STAFF. (a) Within 30 days after beginning employment, newly hired staff must submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable . The examination performed by the health care provider must have been conducted no earlier than 6 months before submission of the statement. Newly hired staff does not include an employee transferring without a break in service from one facility to another when the facility is under the same management or ownership. 1. Evidence of a negative examination must be documented on an annual basis. Documentation provided by the Florida Department of Health or a licensed health care provider certifying that there is a shortage of . . . . . testing materials satisfies the annual . . . . examination requirement. An individual with a positive . . . . . test must submit a health care provider's statement that the	A 078		

AHCA Form 3020-0001

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

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A 078	Continued From page 1 individual does not constitute a risk of 2. If any staff member has, or is suspected of having, a communicable , such individual must be immediately removed from duties until a written statement is submitted from a health care provider indicating that the individual does not constitute a risk of transmitting a communicable (b) Staff must be qualified to perform their assigned duties consistent with their level of education, training, preparation, and experience. Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff must exercise their responsibilities, consistent with their qualifications, to observe residents, to document observations on the appropriate resident's record, and to report the observations to the resident's health care provider in accordance with this rule chapter. (c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C. (d) An assisted living facility to provide services to residents must ensure that individuals providing services are qualified to perform their assigned duties in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor must specifically describe the services the staffing agency or contractor will provide to residents. (e) For facilities with a licensed capacity of 17 or more residents, the facility must: 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and, 2. Maintain time sheets for all staff. (f) Level 2 background screening must be conducted for staff, including staff by	A 078		

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A 078	Continued From page 2 the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S. This Statute or Rule is not met as evidenced by: Based on record review, and interview with staff the facility failed to ensure that within 30 days of employment staff submit a written statement from a health care provider documenting that the individual is free from signs or symptoms of communicable for 3 (Assistant Director of Clinical Services [ADCS], Staff B, Staff C) of 4 employees reviewed. This has the potential for widespread transmission and impact of communicable on populations. The findings included: Review of personnel records on revealed the ADCS was hired on ; Caregiver Staff B was hired on ; Certified Nurse Assistant Staff C was hired on . The files for ADCS, Staff B, and Staff C contained no Physician Health Statement within 30 days of employment indicating they are free of communicable . During an interview on at 10:30 a.m., the Human Resources Manager confirmed that she did not have Physician Health Statement for the ADCS, Staff B, or Staff C and said she will audit the files to ensure compliance with regulatory requirements. Class III "Photographic evidence obtained."	A 078		

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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; ; 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 1 (Assistant Director of Clinical Services [ADCS]) of 4 staff records reviewed, had Level 2 background screening	CZ814		

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CZ814	Continued From page 1 employment status updated within 10 business days on the Agency's Background Screening Clearinghouse (Clearinghouse) website pursuant to Chapter 435 Florida Statute. This has the potential for staff with disqualifying offenses to have access to adults. The findings included: Record review on of the Clearinghouse Employee Roster indicated the ADCS was hired on and added to the roster on . During an interview on at 10:30 a.m., the Human Resources Manager (HRM) verified they are responsible for adding employees to the Clearinghouse. The HRM acknowledged the ADCS was not added to the Clearinghouse within the timeframe. Unclassified "Photographic evidence obtained."	CZ814		