

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968576	(X3) DATE SURVEY COMPLETED 08/01/2017
NAME OF PROVIDER OR SUPPLIER INSPIRED LIVING AT SARASOTA	STREET ADDRESS, CITY, STATE, ZIP CODE 1900 PHILLIPPI SHORES SARASOTA, FL 34231	

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

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

Based on record review and staff interview the facility failed to ensure completion of a level 2 background screening at the time of hire for an employee with a break in service of more than 90 days from a position that requires screening for 2 (Staff C and E) of 8 staff sampled. Background screening is required for the safety of residents.

The findings included:

1. On _____, record review of Resident Aide Staff C revealed a date of hire of _____. The level 2 background screen on file revealed an eligible date of _____. Review of the employment application for Staff C revealed a gap in employment from _____, 2016 to _____, 2017.

On _____ at 3:02 p.m., in an interview, Resident Aide Staff C confirmed the gap in employment from _____, 2016 to _____, 2017. She said she was unemployed from _____, 2016 to _____, 2017 and added part of that time she was living out of state.

2. On _____, record review of Licensed Practical Nurse (LPN) Staff E revealed a date of hire of _____. The level 2 background screen on file revealed an eligible date of _____. Review of the employment application for LPN Staff E revealed a gap in employment from _____, 2016 to _____, 2016. LPN Staff E was unavailable for interview.

3. On _____ at approximately 5:06 p.m., the facility Business Office Director confirmed Resident Aide, Staff C and LPN, Staff E both had a break in service greater than 90 days from a position that requires level 2 background screening. She said she would arrange for both staff to have a new level 2 screening completed on _____. She added both staff members would be removed from the work schedule until the level 2 background screening was completed with a clear result.

Unclassified

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS

Based on record review and staff interview the facility failed to ensure level 2 background rescreening every 5 years for 1 (Staff D) of 8 employee records sampled.

The findings included:

1. On _____, record review for Licensed Practical Nurse (LPN) Staff D revealed a date of hire of _____.

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 08/15/2017
FORM APPROVED

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and a level 2 background screening eligible date of . There was no evidence of level 2 background rescreening completion after . On . at approximately 4:30 p.m., the facility Business Office Director (BOD) ran an eligibility status check with the Agency for Health Care Administration and the background screening result indicated , "A new screening is required." On . at approximately 4:35 p.m., the facility BOD said level 2 rescreening should have been completed in 2016. She said she would arrange for LPN Staff D to have a new level 2 screening completed on . She added LPN Staff D would be removed from the work schedule until the level 2 rescreening was completed with a clear result. Unclassified		