

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/28/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966202	(X3) DATE SURVEY COMPLETED R 03/07/2018
NAME OF PROVIDER OR SUPPLIER MARI-MAR MANOR 2	STREET ADDRESS, CITY, STATE, ZIP CODE 493 8th AVENUE NORTH SAINT PETERSBURG, FL 33709	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility A third revisit to a complaint (CCR#2017005457) was conducted on in conjunction with a biennial survey and a revisit to complaint (CCR#2017013097 & CCR#2017014427) at Mari-Mar Manor 2 (License #10437), an Assisted Living Facility located in Saint Petersburg, Florida. There were deficiencies identified during the survey. License #10437 Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS Based on record review and interview the facility failed to maintain an updated employee roster in the Agency background-screening clearinghouse for two (Staff B and Staff D) of three employees who worked at the facility Findings included: Review of the AHCA Background Screening Clearinghouse Agency website reveled an absence of Staff B's name, and Staff C's name on the roster for the provider. During interview with the Administrator, on at 04:22 p.m. Administrator confirmed that Staff B cooks for residents. On at 04:32 p.m., the Administrator reviewed the Facility's employee roster and confirmed that Staff B and Staff C were not included. Unclassified		