

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 09/24/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11932650	(X3) DATE SURVEY COMPLETED 09/04/2018
NAME OF PROVIDER OR SUPPLIER SUNNILAND ASSISTED LIVING FACILITY, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 4234 SUNNILAND STREET SARASOTA, FL 34233	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced complaint survey for CCR #2018008323 and CCR #2018009434 and an emergency power plan monitoring visit were conducted on ... at Sunniland, an assisted living facility (license #8267) in Sarasota, Florida. CCR #2018008323 contained 2 allegations, of which none were substantiated. CCR # 2018009434 contained 1 allegation which was unsubstantiated. The emergency power plan monitoring visit was conducted with deficiencies. The following is description of the deficiencies. 0200 - Emergency Environmental Control - 58A-5.036 FAC Based on observation, staff interviews, and record review, the facility failed to ensure they informed 5 (Residents #1, #2, #3, #4, and #5) of 6 residents about the emergency power plan (EPP). The findings included: On ... a review of the facility's documentation did not include a copy of a letter informing residents or responsible party of the approved EPP and when it was implemented. On ... at 7:30 a.m., the Assistant Administrator said the residents or responsible party was notified verbally, in a face-to-face conversation. He said he did not know they were supposed to send a letter of notification for the approval of emergency plan. On ... at 8:00 a.m., the Administrator said she verbally told Residents #1, #2, #3, #4, and #5 of the emergency plan. She said she does not have documentation that her verbal conversations with Residents #1, #2, #3, #4, and #5, and/or their legal representatives were notified of the approved EPP. She said she did not know she needed to send a letter notifying them of the approved EPP as required. On ... at 8:56 a.m., Resident #1 said he did not receive a letter about the comprehensive emergency plan and/or the EPP. On ... at 9:05 a.m., Resident #2 said he did not receive a letter about the comprehensive emergency		

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plan and/or the EPP. On at 9:25 a.m., Resident #3 said he did not receive a letter about the comprehensive emergency plan and/or the EPP. On at 9:35 a.m., Resident #4 said he did not receive a letter about the comprehensive emergency plan and/or the EPP. On at 9:40 a.m., Resident #5 said he did not receive a letter about the comprehensive emergency plan and/or the EPP. Class .		