

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/27/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965589	(X3) DATE SURVEY COMPLETED R 06/06/2019
NAME OF PROVIDER OR SUPPLIER SAVANNAH COURT OF ST CLOUD	STREET ADDRESS, CITY, STATE, ZIP CODE 3791 OLD CANOE CREEK RD SAINT CLOUD, FL 34769	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A revisit to complaint investigation # 2018015042 was conducted at Savannah Ct. of St. Cloud on Deficiency was identified at the time of survey. Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS DEFICIENCY REMAINED UNCORRECTED Based on record review and interview the facility failed to maintain the employment status of all employees within the BGS clearinghouse. Findings: In an interview with the Resident Relations Coordinator on at 10 AM who said she was hired Her duties included handling residents' funds and she had access to their personal belongings. Review of the Agency BGS website on at 9:30 AM revealed the Resident Relations Coordinator was eligible on and was hired on Review of the facility BGS roster on at 9:45 AM revealed she was not listed. In an interview on at 12:30 PM with the administrator who said the roster was overlooked. Unclassified		