

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 106102	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/12/2020
NAME OF PROVIDER OF SUPPLIER SARASOTA POINT REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP 2600 COURTLAND STREET SARASOTA, FL 34237	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG F 0880	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
<p>Level of harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>Based on observation and staff interview the facility failed to maintain the laundry room and laundry equipment in a safe and sanitary manner. This has the potential for the spread of infection to residents and possible injury to staff. The findings included: On 3/12/20 at 11:40 a.m., during a tour of the laundry area with the facility's Infection Control Preventionist, observation revealed the entrance to the clean side of the laundry area is from a heavy, metal door to the outside air. The door could not be closed and there was a noticeable gap below the bottom edge of the door where daylight was clearly visible. This has the potential to allow insects and other environmental factors to enter and possibly contaminate the clean linen. The air vents and duct work discharging air into the clean side of the laundry area were dirty with black, brown and pink residue. The vent was coated with a black residue with the appearance of bio-growth. The edge of the vent was spotted with rust. The duct work had splotches of brownish and pink residue. The light fixtures had metal corrosion. The chain and conduit to the light fixture had an accumulation of lint and dust. There was a piece of sheet metal hanging from the air vent that was held in place by a corroded screw or bolt and had the potential to fall and injure staff members. The baseboard was pulled away from the wall and a hole is broken through the wallboard on the dirty side of the laundry area, providing possible access for pests and contaminants. Leaking connectors for the tubing from the chemical vats to the washing machines had caused corrosion of the equipment and left a white powdery residue. This corrosive residue subjects' linens and staff to contact with a potentially caustic substance. Chemical leaks have the potential for not providing the correct amount of cleaning and disinfecting product for the wash cycle. On 3/12/20, during the tour of the laundry area beginning at 11:40 a.m., the Infection Control Preventionist confirmed the observations noted in the laundry room. ** photographic evidence on file **</p>		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE	

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.