

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964849	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/18/2020
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

SAVANNAH COURT OF LAKE WALES

**12 EAST GROVE AVENUE
LAKE WALES, FL 33853**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments A Complaint Investigation (Complaint Number 2020008734), Focused Control and Generator Monitoring were conducted at Savannah Court of Lake Wales on Deficiencies were identified at the time of survey.	A 000		
A 030 SS=G	59A-36.007(6) FAC; 429.28() FS 429.27 Resident Care - Rights & Facility Procedures 59A-36.007 (6) RESIDENT RIGHTS AND FACILITY PROCEDURES. (a) A copy of the Resident Bill of Rights as described in section 429.28, F.S., or a summary provided by the Long-Term Care Ombudsman Program must be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to rule 59A-36.006, F.A.C. (b) In accordance with section 429.28, F.S., the facility must have a written grievance procedure for receiving and responding to resident complaints and a written procedure to allow residents to recommend changes to facility policies and procedures. The facility must be able to demonstrate that such procedure is implemented upon receipt of a complaint. (c) The telephone number for lodging complaints against a facility or facility staff must be posted in full view in a common area accessible to all residents. The telephone numbers are: the Long-Term Care Ombudsman Program, 1(888)831-0404; , Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida Hotline, 1(800)96- or 1(800)962-2873. The telephone numbers must be posted in close proximity to a telephone accessible by residents	A 030		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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NAME OF PROVIDER OR SUPPLIER SAVANNAH COURT OF LAKE WALES			STREET ADDRESS, CITY, STATE, ZIP CODE 12 EAST GROVE AVENUE LAKE WALES, FL 33853		
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A 030	Continued From page 1 and the text must be a minimum of 14-point font. (d) The facility must have a written statement of its house rules and procedures that must be included in the admission package provided pursuant to rule 59A-36.006, F.A.C. The rules and procedures must at a minimum address the facility's policies regarding: 1. Resident responsibilities; 2. _____ and tobacco use; 3. Medication storage; 4. Resident elopement; 5. Reporting resident _____, neglect, and _____; 6. Administrative and housekeeping schedules and requirements; 7. _____ control, sanitation, and universal precautions; and, 8. The requirements for coordinating the delivery of services to residents by third party providers. (e) Residents may not be required to perform any work in the facility without compensation. Residents may be required to clean their own sleeping areas or apartments if the facility rules or the facility contract includes such a requirement. If a resident is employed by the facility, the resident must be compensated in compliance with state and federal wage laws. (f) The facility must provide residents with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication, pursuant to section 429.28(1)(d), F.S. The facility must allow unidentified telephone calls to residents. For facilities with a licensed capacity of 17 or more residents in which residents do not have private telephones, there must be, at a minimum, a readily accessible telephone on each floor of each building where residents reside. (g) In addition to the requirements of section	A 030			

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A 030	Continued From page 2 429.41(1)(k), F.S., the use of physical _____ by a facility on a resident must be reviewed by the resident's physician annually. Any device, including half-bed rails, which the resident chooses to use and can remove or avoid without assistance, is not considered a physical _____. 429.28 Resident bill of rights.- (1) No resident of a facility shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law, the Constitution of the State of Florida, or the Constitution of the United States as a resident of a facility. Every resident of a facility shall have the right to: (a) Live in a safe and decent living environment, free from _____ and neglect. (b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy. (c) Retain and use his or her own clothes and other personal property in his or her immediate living quarters, so as to maintain individuality and personal dignity, except when the facility can demonstrate that such would be unsafe, impractical, or an infringement upon the rights of other residents. (d) Unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum. Upon request, the facility shall make provisions to extend visiting hours for caregivers and out-of-town guests, and in other similar situations. (e) Freedom to participate in and benefit from community services and activities and to pursue the highest possible level of independence, autonomy, and interaction within the community.	A 030			

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A 030	Continued From page 3 (f) Manage his or her financial affairs unless the resident or, if applicable, the resident's representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as provided in s. 429.27. (g) Share a room with his or her spouse if both are residents of the facility. (h) Reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals except when prevented by inclement weather. (i) Exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, nor any attendance at religious services, shall be imposed upon any resident. (j) Assistance with obtaining access to adequate and appropriate health care. For purposes of this paragraph, the term "adequate and appropriate health care" means the management of medications, assistance in making , , for health care services, the provision of or arrangement of transportation to health care , , and the performance of health care services in accordance with s. 429.255 which are consistent with established and recognized standards within the community. (k) At least 45 days' notice of relocation or termination of residency from the facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally , , the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for	A 030			

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A 030	Continued From page 4 relocation shall be set forth in writing. In order for a facility to terminate the residency of an individual without notice as provided herein, the facility shall show good cause in a court of competent jurisdiction. (1) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without , interference, coercion, discrimination, or reprisal. Each facility shall establish a grievance procedure to facilitate the residents' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or special interest groups. (2) The administrator of a facility shall ensure that a written notice of the rights, . . . , and prohibitions set forth in this part is posted in a prominent place in each facility and read or explained to residents who cannot read. The notice must include the statewide toll-free telephone number and e-mail address of the State Long-Term Care Ombudsman Program and the telephone number of the local ombudsman council, the Elder . . . Hotline operated by the Department of Children and Families, and, if applicable, . . . Rights Florida, where complaints may be lodged. The notice must state that a complaint made to the Office of State Long-Term Care Ombudsman or a local long-term care ombudsman council, the names and identities of the residents involved in the complaint, and the identity of complainants are kept confidential pursuant to s. 400.0077 and that retaliatory action cannot be taken against a resident for presenting grievances or for exercising any other resident right. The facility must ensure a resident's access to a telephone to	A 030		

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A 030	Continued From page 5 call the State Long-Term Care Ombudsman Program or local ombudsman council, the Elder Hotline operated by the Department of Children and Families, and Rights Florida. 429.27 Property and personal affairs of residents.- (1)(a) A resident shall be given the option of using his or her own belongings, as space permits; choosing his or her roommate; and, whenever possible, unless the resident is adjudicated or under state law, managing his or her own affairs. (b) The admission of a resident to a facility and his or her presence therein shall not confer on the facility or its owner, administrator, employees, or representatives any authority to manage, use, or dispose of any property of the resident; nor shall such admission or presence confer on any of such persons any authority or responsibility for the personal affairs of the resident, except that which may be necessary for the safe management of the facility or for the safety of the resident. This Statute or Rule is not met as evidenced by: Based on observations, record review, and interviews, the facility failed to safe guard residents' well-being by failing to follow current control standards related to COVID-19 and Florida Governor's emergency orders DEM Order 20-006, dated , delineating minimum screening standards for persons entering identified residential facilities and not cleaning and , frequently touched surfaces. Findings Included:	A 030		

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A 030	Continued From page 6 The COVID-19 is a transmissible that presents severe risk to persons who are aged, infirm, or suffer from co-including, but not limited to, system deficiency, and. See generally, Publications of the Centers for Control. On , the Governor of the State of Florida issued Executive Order 20-51 designating a Public Health Emergency as a result of COVID-19 and its impact. Pursuant to that authority, emergency orders have been issued by the Florida Division of Emergency Management to implement the protections necessary to assure the health, safety, and well-being of Florida's citizenry, including those most to the effects of . Among those emergency orders was DEM Order 20-006, dated , delineating minimum screening standards for persons entering identified residential facilities. The Agency for Health Care Administration (AHCA) has issued guidance and clarification on DEM Order 20-006 to providers, and on , issued an alert notifying nursing homes that all staff or other individuals admitted to a residential facility must don masks and that caregivers must wear gloves when providing resident care. While the treatment and management of residents with and the implementation of isolation precautions for such events are a long-standing health care issues faced by residential facilities, the ease of contagion and the effects of presented by COVID-19 mandate that providers exert meticulous practice and procedure to identify resident symptoms and take immediate	A 030		

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A 030	Continued From page 7 ... procedures to both assure appropriate treatment of a potentially resident and protect the remainder of a facility's population from the risk of spread of the During the entrance to the Facility, conducted on ... at 11:00am, the Surveyor walked through the front door, which was ajar. There was no staff present upon entrance to initiate the screening process. There was a Hospice visitor standing at a table in the entryway that was answering a questionnaire and taking own temperature. There were three staff present in the medication room and the Resident Care Director asked if Surveyor had completed the screening form and when Surveyor stated that there was no explanation of the Facilities screening process, the Resident Care Director took Surveyor to the table and had Surveyor fill out the questionnaire and took Surveyor's temperature. The Resident Care Director did not appear to have reviewed the questionnaire answers to determine if Surveyor was placing the Facility at risk for Covid-19. Observations, conducted on ... revealed that the Facility had no cleaning or housekeeping services in place or had increased housekeeping services to comply with the recommendation for an increase in cleaning and ... of frequently touched surfaces. Resident # 1, #2, #3, #4, #5, #6, #7, #8, #9, and #10's rooms and bathroom were filthy and unclean. At 12:00pm, Resident #7's room and bathroom had dried feces on the inside of the toilet bowl; there was smeared ... on the light switch; and, there was dust/dirt on the floors and counter tops. At 12:03pm, Resident #5's room and bathroom had dried feces on the inside of the toilet bowl; there was smeared ...	A 030		

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A 030	Continued From page 8 on light switch; there was dust/dirt covering floors and counter tops; and, the faucet was covered with soap scum or toothpaste. At 12:06pm, Resident #2's room and bathroom had a worn toilet seat; and, dust/dirt on floors and counter tops. At 12:08pm, Resident #4's had feces and toilet paper in toilet; the bathroom had dirt/dust on floors & counter tops; and, the light switches had smudged At 12:11pm, Resident #1's room and bathroom had mold inside the toilet bowl; and the sink had spills covering the inside and around the counter. At 12:15pm, Resident #8's room and bathroom had dust/dirt covering sink, floor, and counters; and, and the light switch had smeared At 12:17pm, the side exit door had leaves covering the floor and the carpet throughout all common areas had no evidence of recent vacuuming. At 12:18pm, Resident #9's room and bathroom had dirt and dust on floors and countertops; there was mold/mildew inside the toilet bowl; the faucet was covered in soap scum or dried paste; the carpet strip was broken but in place and slid under Surveyor's; and, the light switch had smeared At 12:23pm, Resident #6's room and bathroom had dirt/dust covering the toilet, sink, counters, and floors; and, the shower appeared unclean. At 03:10pm, Resident #10's room had cotton from a shredded adult brief and food crumbs covering the floor; the brown tray table was covered with a white unknown substance and from previous spills/food; there was dust/dirt covering the counter tops and tile flooring; there was dried feces smeared on the toilet seat; and, the sink in the bed room had tiny bugs laying around the sink. At 03:15pm, Resident #3's room had food crumbs covering the room floor and dust/dirt covering bathroom floor; the sink faucet was covered with soap scum or toothpaste; there was	A 030		

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A 030	Continued From page 9 dust on the counter; and, the toilet seat appeared old and worn. Interviews with Residents #1, #4, #5, #7, and #9, conducted on _____, revealed that the Facility was not providing housekeeping services to the resident residing in the Facility. At 12:00pm, Resident #7 stated that the resident had not "noticed anyone come in and clean lately". At 12:03pm, Resident #5 stated that the Facility does "not have a housekeeper". At 12:08pm, Resident #4 was unsure if anyone cleaned the resident's room or bathroom. At 12:11pm, Resident #1 stated that "no staff cleaned" the resident's room or bathroom and that the resident kept the bathroom clean. Resident #1 stated, "I take care of myself". At 12:18pm, Resident #9 stated that the resident moved to the Facility eight months ago and that the carpet strip had been broken since the resident moved in. Resident #9 stated that "no one has ever come into [the resident's] room or bathroom to clean". During an interview with the Resident Care Director, conducted on _____ at 12:30pm, the Resident Care Director stated that the Facility had an "open housekeeping position" and "it's been open for a while" and "we have a third-party providing housekeeping services". During an interview with Staff A, conducted on _____ at 01:04pm, Staff A stated that housekeeping at the Facility was "sometimes, they're not so great". An attempted record review of the contract for the third-party housekeeping services was conducted on _____ at 11:00am, 01:03pm, and 02:30pm, however the contract was not provided.	A 030		

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A 030	Continued From page 10 A review of the Residency Contract, conducted on _____, revealed the Residency Contract stated on page 3, paragraph 5 (f), that "weekly apartment housekeeping which includes vacuuming/mopping of all floor coverings, cleaning of the furnishings and counters, full bathroom clean-up, flat linen change, towel exchange, and surface dusting" were provided by the Facility. A review of the Housekeeping Schedule, conducted on _____, the housekeeping daily cleaning schedule was supposed to include: "three bathrooms daily; activities daily; lobby clean/vacuum daily and clean glass doors/windows; door knobs all rooms/offices; clean/sanitize trash cans daily while eating in room; and, call bell audit". The housekeeping weekly schedule was supposed to include: "Mondays - deep clean _____; Tuesday - deep clean _____; Wednesday - deep clean _____-25; Thursday - deep clean _____-34; and, Fridays - deep clean _____-43. There was a signature/checklist logs to be maintained and the only cleaning checklist log available for review was dated _____ for _____, and 21 and no signature of the staff providing the cleaning services. A record review for Resident's #1, #3, #6, #8, #9, and #10, conducted on _____, revealed that the residents required some type of assistance with ambulation, toileting, and/or transferring making them unsafe to perform their own housekeeping/cleaning tasks. Resident #1 was at risk for _____ and required supervision with ambulation; and, assistance with bathing according to Resident #1's Health Assessment dated _____. Resident #3 required _____.	A 030		

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A 030	Continued From page 11 assistance with ambulation, toileting, and transferring according to Resident #3's Health Assessment dated Resident #5 required supervision with ambulation and toileting according to Resident #5's Health Assessment dated Resident #6 required assistance with ambulation according to Resident #6's Health Assessment dated Resident #7 required supervision with toileting and transferring and required assistance with ambulation according to Resident #7's Health Assessment dated Resident #8 required supervision with ambulation, toileting, and transferring according to Resident #8's Health Assessment dated During interviews with the Senior Executive Director (SED) and an Executive Director (ED) from a sister Facility, conducted on, revealed that the Facility was not following good control measures for Covid-19 and did not have an effective housekeeping process in place. At 11:40am, the ED stated that the Facility was supposed to screen visitors upon entrance and that the front door was supposed to be locked at all times ensuring staff would answer the front door and screen the visitor. At 01:30pm, the SED and ED agreed that the lack of housekeeping did not provide a homelike environment for residents and agreed that housekeeping services were lacking in the Facility. Surveyor took SED and ED to observe each room and bathroom described above. At 03:20pm, the SED and ED agreed that the Facility did not appear to be providing housekeeping services and that the Facility had not increased cleaning and of frequently touched surfaces. Class II	A 030		

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