Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11912099	A. BUILDING: _____ B. WING _____	09/29/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRIDGEWATER (THE)	500 WATERMAN AVENUE MOUNT DORA, FL 32757

(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 licensure survey with extended congregate care and emergency power plan monitoring and a COVID-19 focused control survey were conducted on through , at Bridgewater at Waterman Village. Deficiencies were identified.	A 000		
AE205 SS=C	59A-36.021(5); 429.07 (3)(b) ECC - Health Assessment 59A-36.021 (5) HEALTH ASSESSMENT. Before receiving extended congregate care services, all persons. including residents transferring within the same facility to that portion of the facility licensed to provide extended congregate care services, must be examined by a health care provider pursuant to rule 59A-36.006, F.A.C. A health assessment conducted no more than 60 days before receiving extended congregate care services meets this requirement. Once receiving services, a new health assessment must be obtained at least annually. 429.07 (3)(b), FS 6. Before the admission of an individual to a facility licensed to provide extended congregate care services, the individual must undergo a medical examination as provided in s. 429.26(4) and the facility must develop a preliminary service plan for the individual. 7. If a facility can no longer provide or arrange for services in accordance with the resident's service plan and needs and the facility's policy, the facility must make arrangements for relocating the person in accordance with s. 429.28(1)(k). This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility	AE205		

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AE205	Continued From page 1 failed to obtain a new health assessment, AHCA Form 1823, at least annually for two of the three residents reviewed for extended congregate care (ECC). Resident #s 5 and 12. Findings: A record review of Resident #5's file showed the most recent health assessment, AHCA Form 1823, was dated . A record review of Resident #12's file showed the most recent health assessment, AHCA Form 1823, was dated . On at 11:30 AM an interview was conducted with the Director of Nursing. She confirmed that Resident #5 and Resident #12 last AHCA Form 1823s were in 2018 and as ECC residents they should have a new health assessment at least annually. A record review of the facility's policy, titled Criteria for Continued Residency, read, "The minimum criteria for continued residency in an ECC program shall be the same as the criteria for admission except for the following. Policy #34-1003 Effective . Reviewed/revised date . . . . . 3. Once admitted, a new health assessment must be obtained at least annually." Class III	AE205		