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
	AL11968572	A. BUILDING: _____ B. WING _____	10/12/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RIVERTOWN ASSISTED LIVING LLC	16354 SW CHIPOLA RD BLOUNTSTOWN, FL 32424

(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 An unannounced complaint survey (2020015977, 2020017411, 2020019159, 2021003652, 2021004688) was conducted at Rivertown Assisted Living, LLC on . . . . . , 2021. At the time of the survey deficient practice was identified.	A 000		
A 152 SS=H	59A-36.014(3) FAC Physical Plant - Safe Living Environ/Other (3) OTHER REQUIREMENTS. (a) All facilities must: 1. Provide a safe living environment pursuant to section 429.28(1)(a), F.S.; 2. Be maintained free of hazards; and, 3. Ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order. (b) Pursuant to section 429.27, F.S., residents must be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident bedroom or sleeping area must have at least the following furnishings: 1. A clean, comfortable bed with a mattress no less than 36 inches wide and 72 inches long, with the top surface of the mattress at a comfortable . . to ensure easy access by the resident, 2. A closet or wardrobe space for hanging clothes, 3. A dresser, ... or other furniture designed for storage of clothing or personal effects, 4. A table or nightstand, bedside lamp or floor lamp, and waste basket; and, 5. A comfortable chair, if requested. (c) The facility must maintain master or duplicate keys to resident bedrooms to be used in the event of an emergency.	A 152		

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A 152	Continued From page 1 (d) Residents who use portable bedside commodes must be provided with privacy during use. (e) Facilities must make available linens and personal laundry services for residents who require such services. Linens provided by a facility must be free of tears, stains and must not be . This Statute or Rule is not met as evidenced by: Based on observation, interview and record review the facility failed to provide a safe and decent living environment free from pests for 2 of 4 houses (house 1 and 3) and failed to ensure that all existing architectural, mechanical, electrical, and appurtenances were maintained in good working order for 4 of 4 houses (houses 1, 2, 3 and 4). The findings include: On beginning at approximately 9:00 AM, a tour was conducted of the four houses that made up the campus of the facility. During the tour multiple physical environmental issues were identified, to include broken and cracked tiles observed throughout all four houses in the entrance areas, hallways and in resident's rooms. In House 1 the bathroom tub was found to have a large amount of brown rust stains and the door near the bathtub had a large amount of rust and a large hole. Small, brown, legged, crawling insects about the size of an apple seed, identified as bed bugs, were noted to be in one of the resident's bed and chair. These same insects were noted in House 3 and the bathroom was observed to have a large amount of black substance on the ceilings and around the air vent. When entering house 3 the threshold was soft and loose and when stepping down the floor sunk inward. House 4	A 152		

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A 152	Continued From page 2	A 152		

was observed to have a large amount of rust covering the heater and the window seal had a large amount of black substance.

Photographic evidence obtained.

On . . . . at approximately 1:51 PM, an interview was conducted with the Administrator who stated she was aware of the environmental concerns and would fix the problems.
On . . . . at approximately 9:15 AM, an observation in House 1 was made of a bed bug crawling on the blue uncovered mattress of Resident #8. During the observation an interview was conducted with Resident #8. She was asked if she had experienced any skin irritations, rashes, itching, or insect bites anywhere on her skin recently. Resident #8 denied any irritations, rashes, or bites on her skin.

On . . . . at approximately 9:35 AM, while conducting the tour of House 3, an observation was made of a bed bug crawling on the bed of Resident #19. Resident #19 declined an interview.

On at approximately 11:24 AM, an observation was made of the uncovered mattress of Resident #17. The mattress had scattered black stains around the edges. Also noted was a white powder scattered on the floor around the bed and between the mattresses. Resident #17 was present in the room during the observation and an interview was immediately conducted. The resident stated " Bugs are biting me at night. They bite me when I am in my bed at night, and they are on the walls and in the bathroom. I should not be getting bitten by bugs at night. I have told them about the bugs biting me and they put this white powder on my bed and floor. The

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A 152	Continued From page 3 powder does not work the bugs keep coming." Resident #17 was asked if he had rashes on his skin. He explained that his skin is itchy. On at approximately 12:50 PM, an interview was conducted with Resident #4. He was asked if he had seen any bugs on his bed or experienced bug bites, itching or rashes. Resident #4 explained that there have been bed bugs in the facility. He explained that he does not have bed bugs in his room because he has his own bed bug spray and treats his room himself. He also explained that he keeps his room locked so there is no access to other residents." He was asked to show what he is using to treat his room. Resident #4 had a large container of bed bug spray at the base of his bed. When the surveyor took photographs of the spray. Resident #4 stated: " They do not know that I am spraying my own room. I keep the spray hidden." Resident #4 was asked if he had seen facility staff or anyone providing pest control at the facility. He said, "They covered the mattresses with plastic and put white powder out. The powder does not seem to work." Photographic evidence obtained. On at approximately 2:00 PM, an interview was conducted with the facility administrator during which she was notified that live bed bugs were observed on House 1 and House 3. She was notified that the bed of Resident #17 in house 3 had scattered black stains around the edges of his uncovered mattresses. Resident #17 complained of itching and bug bites. The administrator explained that the Florida Department of Health Inspector had just been out on and found no evidence of bed bugs. She said they had a pest control	A 152		

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A 152	Continued From page 4 company come out to treat the facility recently as well. She was asked to provide copies of both inspections and information about everything that had been done by the facility to treat bed bugs. She provided a copy of an undated email from a pest control company and a County Health Department Group Care Inspection Report dated . On a review of the County Health Department Group Care Inspection Report was conducted. The Inspection was dated with a time of 9:53 AM to 10:29 AM. The report did not cite any concerns with infestation or vermin control. A review of the email with a sales agreement number from the pest control company was conducted. A date of treatment was not included on the email. On at approximately 2:45 PM, a telephone interview was conducted with the call center , at the pest control company listed on the email. She was asked to provide information about the dates of treatment, type of treatment, and the specific areas of the facility that were treated. The call center , explained that one treatment was performed at the facility on . Services provided on were the only pest control services that the company had provided at the facility. She said: "4 mattresses, and 4 box springs to total 4 beds were treated on for bed bugs." She was asked to explain specifically what type of treatment was performed to the mattresses. She was also asked to explain any treatment that was provided to the surrounding areas. The call center , explained that she was unable to view the work order from that date to provide further information. The call center , said she would have one of the	A 152		

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A 152	Continued From page 5 service managers call . . . to provide additional information. As of survey completion on a service manager had not called to provide additional information. On at approximately 9:00 AM, a telephone interview was conducted with the Florida Department of Health Environmental . . . . . from Calhoun County Health department who conducted the tour of the facility on . . . . . The Environmental . . . . . explained that bed bugs were found during an inspection last year on . . . . . He returned for a follow up inspection after treatment by the pest control company on . . . . . At the time of the inspection on one bug was observed in the facility. The administrator was notified that further treatment was indicated. On at approximately 2:50 PM, a follow up interview was conducted with the facility administrator. She was asked to explain any additional treatment that had been provided by the facility since . She explained that she had just called another company to come out to treat the facility on . The administrator provided information on the company that will be coming to treat the facility in a few days. Class II	A 152		