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
	AL11942763	A. BUILDING: _____ B. WING _____	10/20/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRENTWOOD RETIREMENT COMMUNITY	1900 WEST ALPHA COURT LECANTO, FL 34461

(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 unannounced complaint investigation (complaint #2021012231) was conducted at Brentwood Retirement Community on . . . . Deficiencies were identified at the time of the survey.	A 000		
A 152 SS=D	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. (d) Residents who use portable bedside	A 152		

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A 152	Continued From page 1 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 living environment in two of two resident dining rooms observed. This has the potential of affecting the entire population of 67 residents. Findings: On , at approximately 10:14 AM, a tour of the facility was conducted. The main dining room in the Beechwood building was observed to have an unknown black substance present around one of the ceiling skylights. The dining room of The Lodge building was observed to have an unknown black substance present around two of the ceiling air conditioning vents. Residents were observed walking through the dining rooms at this time. (Photographic evidence obtained.) During an interview on at approximately 12:26 PM, the Administrator confirmed he and his three-person maintenance staff are aware of these issues. During an interview on . . . . . at approximately 1:04 PM, the Regional Director of Facilities Management confirmed he is aware of the issue in the facility. He stated he is aware of the unknown black substance in the Beechwood and Lodge buildings.	A 152		

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A 152	Continued From page 2 Review of a State of Florida Department of Health inspection report, dated . . . . . , revealed it contained the following statements: "Observed mold/mildew like buildup near skylights in the Beachwood and Lodge area dining rooms. Find leak in skylights, repair and remove buildup. REPEAT VIOLATION." Class III	A 152		