

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910844	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 08/29/2022
NAME OF PROVIDER OR SUPPLIER OAK MANOR			STREET ADDRESS, CITY, STATE, ZIP CODE 3600 OAK MANOR LANE LARGO, FL 33774		
(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 capacity increase survey was conducted at Oak Manor Senior Living Community Assisted Living Facility on . The facility had deficiencies at the time of the survey.	A 000			
A 004 SS=D	59A-36.004 FAC Licensure - Requirements 59A-36.004 License Requirements. (1) SERVICE PROHIBITION. An assisted living facility may not represent that it provides any service other than a service for which it is licensed to provide. (2) CHANGE IN USE OF SPACE REQUIRING AGENCY CENTRAL OFFICE APPROVAL. A change in the use of space that increases or decreases a facility's capacity must not be made without prior approval from the Agency Central Office. Approval must be based on the compliance with the physical plant standards provided in Rule 59A-36.014, F.A.C., as well as documentation of compliance with applicable fire safety and sanitation inspection requirements referenced in Rule 59A-36.005, F.A.C. (3) CHANGE IN USE OF SPACE REQUIRING AGENCY FIELD OFFICE APPROVAL. A change in the use of space that involves converting an area to resident use, which has not previously been inspected for such use, must not be made without prior approval from the Agency Field Office. Approval must be based on compliance with the physical plant standards provided in Rule 59A-36.014, F.A.C., as well as documentation of compliance with applicable fire safety and sanitation inspection standards referenced in Rule 59A-36.005, F.A.C. (4) CONTIGUOUS PROPERTY. If a facility consists of more than one building, all buildings included under a single license must be on contiguous property. "Contiguous property"	A 004			

AHCA Form 3020-0001

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

TITLE

(X6) DATE

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A 004	Continued From page 1 means property under the same ownership separated by no more than a two-lane street that traverses the property. A licensed location may be expanded to include additional contiguous property with the approval of the agency to ensure continued compliance with the requirements and standards of Chapters 408, Part II, 429, Part I, F.S. and rule Chapter 59A-35, F.A.C., and this rule chapter. (5) PROOF OF INSPECTIONS. A copy of the annual fire safety and sanitation inspections described in Rule 59A-36.005, F.A.C., must be submitted annually to the Agency Central Office. The annual inspections must be submitted no later than 30 calendar days after the inspections. Failure to comply with this requirement may result in administrative action pursuant to Chapter 408, part II, and Section 429.14, F.S., and rule Chapter 59A-35, F.A.C. (6) RESIDENTS RECEIVING STATE-FUNDED SERVICES. Upon request, the facility administrator or designee must identify residents receiving state-funded services to the agency and the department for monitoring purposes authorized by state and federal laws. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to obtain required approval for the change in use of space. Additionally, the facility failed to ensure there was documentation of compliance with applicable fire safety and sanitation inspection requirements referenced in Rule 59A-36.005, F.A.C. Finding Included: A record review conducted on _____ revealed a total of six one bedroom and one-bathroom suites that were to be converted into shared	A 004			

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A 004	Continued From page 2 two-bedroom suites. (Photographic evidence obtained) A record review of an email dated 11/3/2021 from the local zoning authority conducted on revealed a review of the facility's zoning which stated "if you [facility] are just adding beds to an already existing two bed room suite/unit. You will not need to get a remodel permit." During an interview with the Administrator conducted on at 8:50 a.m., she stated the plan was to place a curtain track to transform the one-bedroom suites into two-bedroom suites and the track would be placed in the common area of the apartment to accommodate for a room. An observation on at 9:00 a.m. was conducted with the Administrator, the Resident Services Coordinator, the Housekeeping Director and the Maintenance Director of the rooms for the capacity increase. All rooms observed were one-bedroom suites. During an interview conducted on beginning at 9:00 a.m., the Maintenance Director and Housekeeping Director stated the plan was to add a curtain to the living room area to divide the living spaces where one would be the living room and the other side would be the bedroom and the closet would be located in the front hallway. An interview conducted on at 9:05 a.m. with the Administrator she stated they had not notified the residents living in the one-bedroom suites that their rooms would be converted into two-bedrooms.	A 004			

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A 004	Continued From page 3 An observation on at 11:15 a.m. of resident , rooms were observed to be a one bedroom and one-bathroom suites. The suite was shared with a resident occupying the common area/living room as a bedroom and there was no division for privacy observed. Class III	A 004			