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
	AL11966607	A. BUILDING: _____ B. WING _____	R 09/01/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HERON HOUSE OF LARGO	2050 EAST BAY DRIVE LARGO, FL 33771

(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 second revisit to a complaint investigation (#2022006976 and #2022007450) was conducted at Heron House of Largo on . . . . Deficiencies were identified at the time of the visit.	{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 and interviews, the facility failed to provide a safe and clean environment for all residents. Findings Included: In an observation during a tour of the facility conducted on from 9:00am -12:45pm revealed the first and second floor resident hallways had soiled and stained carpeting. Additionally, there were missing baseboards and uneven thresholds to resident rooms and common areas in the memory care unit. There was an exposed wire from the automatic locked memory care unit door, inside the memory care unit. Furthermore, the temperature in three of the second-floor hallways felt very warm. Temperatures read 82.0 degrees Fahrenheit on a thermo-hygrometer in the second-floor resident hallways. Portable air conditioners were running in the second floor Memory Care unit common area, the second floor hair salon, the first floor marketing office, and the Administrator's office. Three heavy duty portable fans were observed blowing on carpeting in just one of the second story hallways. In an interview with the facility hairdresser conducted on at 10:29am she said "It gets too hot so we keep the shades down and don't take anyone until the first thirty minutes we	{A 152}		

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{A 152}	Continued From page 2 are here, so it can cool down. It has been this way for a while now." In an interview with Resident #9 conducted on [redacted] at 10:24am he stated "the air is out in all the common areas and dining room, and it gets warm. When are they going to fix it?" In an interview with Resident #6 conducted on [redacted] at 10:00am he stated that the air conditioner was still not fixed, and it was hot. In an observation of the memory care unit conducted on [redacted] at 10:00am and again at 12:00pm there were clear garbage bags of garbage on the floor in the hallway outside resident rooms In an interview with Resident #8 conducted on [redacted] at 10:11am he said "I have a wall unit in my room, but is warm in here." In an interview with the Administrator conducted on [redacted] from 12: :10pm she admitted the door thresholds in Memory Care were not level and said Maintenance would have the floors completed soon. She said she had not heard anything from corporate about the carpeting, but that the Maintenance Director had been trying to clean them himself. Photo evidence obtained. Class III	{A 152}		