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
	AL11968636	A. BUILDING: _____ B. WING _____	C 02/23/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANGELS SENIOR LIVING AT NEW TAMPA, LLC	14712 N 42ND ST TAMPA, FL 33613

(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 complaint investigation (complaint numbers 2023002102 and 2023002450) was conducted at Angels Senior Living at New Tampa on . Deficient practice was 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 maintain a clean and safe living environment free of pests (roaches). Findings included: An interview was conducted with Resident #7, in her room, at 11:17am on . . . . . In a statement, she said that she saw roaches in her room. She doesn't remember the last time, but when she saw them, she would step on them, and not tell anyone about it. An interview was conducted with Resident #8, in her room, at 12:28pm on . She stated that she has seen bugs in the facility, and she knew that the kitchen had a lot of problems. She has seen roaches coming out of the floors, in her bathroom, where the vinyl is coming up off the floor. The last time she saw a bug in her room was Sunday night ( ). A review of the facility's Pest Control Sighting Log, conducted on . . . . . , revealed that the the last time a roach sighting was logged, was on . . . . . , in . . . . . An observation at 3:20pm on . . . . . , on the first floor of the facility, in the activity room where AHCA surveyors were working, when a small German cockroach crawled across the table.	A 152		

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A 152	Continued From page 2 Then the roach hid and was again sighted a few minutes later. The roach was identified as what appeared to a be German cockroach. In a interview with the Regional Wellness Director at 3:30am on , she stated that she guessed she would need to add it (the roach sighting) to the Pest Control Sighting Log. Photographic evidence obtained. Class III	A 152		