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
	AL11966519	A. BUILDING: _____ B. WING _____	05/09/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AMBIANCE AT MAITLAND	740 NORTH WYMORE ROAD MAITLAND, FL 32751

(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 #2023002149 was conducted on . . . . . at Ambiance at Maitland. A deficiency was found 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 commodes must be provided with privacy during use.	A 152		

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A 152	Continued From page 1 (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 record review, observation and interviews the facility failed to maintain a clean environment and ensure facility equipment (water heater) was in good working order for all residents. Findings: During a tour on , it was observed that the carpets in the resident hallways A, B, C, D, and E were heavily soiled with large black and brown stains throughout. In an interview on . . . . . at 11:30am with resident#3, he stated in , he did not have hot water for 5 days. He stated once the new water heater was working, he has not had a problem since then. In an interview on . . . . . at 11:45am with resident#4, she stated in , she also did not have hot running water in her room for 5 days while they were replacing the water heater. In a record review of a facility invoice dated . . . . . , it revealed a new tankless water heater was installed. However, after the replumb to accommodate the new water heater, the existing mixing valve failed and needed to be relocated. In an interview with the administrator on at 12pm, she stated it took 5 days for the new water heater to be running properly and therefore	A 152		

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A 152	Continued From page 2 caused residents not to have hot water in their rooms. She stated she was also aware of the heavily soiled carpets and will them replaced when it is approved by corporate. Class III PHOTOGRAPH EVIDENCE OBTAINED	A 152		