

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967671	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 08/15/2023
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NAME OF PROVIDER OR SUPPLIER EMERALD GARDENS PROPERTIES, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 1012 N 72 AVENUE PENSACOLA, FL 32506
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(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 for complaint number 2023012414 was conducted at Emerald Gardens Properties, an assisted living facility in Pensacola, FL, on Deficiencies were identified at the time of 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		

AHCA Form 3020-0001
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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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, resident interviews, and record reviews, the facility failed to consistently maintain the air conditioning system in good working order, which is required for the safety of the residents. The findings include: On, a tour of the facility was conducted, which revealed the following temperature and humidity readings (the outside temperature immediately prior to entrance was 97 degrees Fahrenheit): At 11:04 am, a reading was taken in the main common area outside the dining room which read 82.5 degrees Fahrenheit and a humidity reading of 59.5%. At 11:07 am, a reading was taken in the common area at end of the hall near which read 80.7 degrees Fahrenheit and a humidity reading of 62.2%. At 11:10 am, a reading was taken in the common area near which read 80.7 degrees Fahrenheit and a humidity reading of 70.2%. At 11:14 am, a reading was taken outside which read 81.5 degrees Fahrenheit and a humidity reading of 67.5%. At 11:18 am, a reading was taken in which read 81.5 degrees Fahrenheit and a humidity reading of 65.5%.	A 152		

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A 152	Continued From page 2 At 11:20 am, a reading was taken in which read 82.0 degrees Fahrenheit and a humidity reading of 67.9%. At 11:21 am, a reading was taken in which read 80.7 degrees Fahrenheit and a humidity reading of 66.9%. On at 11:40 am, an interview was conducted with Resident #1. They stated that they finally got a window unit a couple of hours ago. They stated that their room was the hottest room in building. When asked about how long the air conditioning had been broken, they responded that it has been ongoing since last year. On at 11:45 am, an interview was conducted with Resident #5. At that time, they stated that administration told them they had the warmest room in the building. When asked how the facility was their concern with the air conditioning, they stated that they were given two fans. They said that the issue had been going on for at least three months. They said that the Administrator had contractors come out to do quotes for fixing the problem but have yet to fix it. A temperature reading was taken in the room during the interview. The reading was 82.9 degrees Fahrenheit and the humidity reading was 69.4%. On at 1:30 pm, an interview was conducted with the facility's Administrator. At that time, she stated that the air conditioning issue had been going on for a couple months, ever since the heat waves in the area started. She stated that a contractor came out recently to give them a quote for the repair, but the contractor recommended replacing the current systems with all 5-ton systems when the facility is wanting the 2- and 3-ton systems to be repaired. She also	A 152		

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A 152	Continued From page 3 stated that another air conditioning contractor was on the property the day of the survey and would be sending in a quote as well. She provided a copy of the first quote and a business card from the contractor on-site the day of the survey. A review of the quote was conducted. It stated, "5 to 6 air conditioners with gas heat, new slabs to elevate units that are hurricane rated, tiedowns, Armaflex, duct board and any other material needed to install new systems. price, \$11,000 per unit. Will take \$5,500 at the time of the install. Will give a 15-day period to pay the remaining \$5,500." Class III	A 152		