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
	AL11966453	A. BUILDING: _____ B. WING _____	01/19/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VICTORIA GARDENS HOME ALF	3091 NW 43RD STREET LAUDERDALE LAKES, FL 33309

(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 An announced Initial Licensure and Generator Monitoring survey was conducted on at Victoria Gardens Home ALF. The facility had deficiencies at the time of the survey.	A 000		
A 152	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 observations and interviews the facility failed to provide a safe, clean, decent living environment, free of safety hazards. The findings: Observation of the facility on by this surveyor revealed the facility has twenty-eight (28) beds comprised of 14 shared rooms.On between 2:00 PM and 4:00 PM, this surveyor was provided a tour of the facility by the Administrator and maintenance director. The following observations were made at that time: a) Observation of # which is located on the east side of the home revealed the windows are screwed shut from the outside with metal screws that penetrate the window frame and prevent them from opening. This surveyor requested the maintenance manager to open the windows, which he was unable to do during the survey. Observation of the room also revealed a broken closet door that was unable to be opened, window blinds that were unable to be opened due to a broken handle, and missing window screen (photo evidence obtained). b) Observation of # which is located on the	A 152		

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A 152	Continued From page 2 west side of the home revealed windows are screwed shut from the outside with metal screws that penetrate the window frame and prevent them from opening, a broken tile near the closet, a broken closet door unable to open, and window blinds that were unable to open due to a broken handle (photo evidence obtained). c) Observation of # which is located on the west side of the home revealed that the closet has missing doors, missing an electrical wall plate near the bed (photo evidence obtained). d) Observation of # which is located on the west side of the home revealed that the closet has missing doors, and window blinds that were unable to open due to a broken handle (photo evidence obtained). e) Observation of # which is located on the west side of the home revealed a broken closet door unable to open and missing doorknobs (photo evidence obtained). f)Observation of # which is located on the west side of the home revealed a missing electrical wall plate near the bed, a broken closet door unable to open, a window on the west side that has no privacy due to missing blinds, and a torn window screen (photo evidence obtained). g) Observation of # which is located on the west side of the home revealed that the inside closet interior wall has a crack close to the ceiling, and the spring box cover is stained (photo evidence obtained). h) Observation of # which is located on the	A 152		

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A 152	Continued From page 3 west side of the home revealed that the inside closet interior wall has a crack near the ceiling and a closet door is unable to open, (photo evidence obtained). i) Observation of # which is located on the north side of the home revealed that the home has what looks like to be uneven bulging tiles upon the room entrance, windows are screwed shut from the outside with metal screws that penetrate the window frame, and prevent them from opening, a hole in the wall near the dresser, and closet doors unable to open (photo evidence obtained). j) Observation of # located on the east side of the home revealed that windows are screwed shut from the outside with metal screws that penetrate the window frame and prevent them from opening and closet doors unable to open. (photo evidence obtained). k) Observation of # located on the east side of the home revealed that closet doors were unable to open, an observation by this surveyor an additional portable floor A/C unit was in the room. This surveyor asked the maintenance director why the room has 2 A/C units (wall unit and floor unit) he stated it gets hot in the summer. (photo evidence obtained). l) Observation of # located on the east side of the home revealed windows are screwed shut from the outside with metal screws that penetrate the window frame and prevent them from opening and closet doors are unable to open (photo evidence obtained). m) Observations in Sections 3 and 4 kitchen and	A 152		

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A 152	Continued From page 4 common areas (dining): The kitchen pick-up window glass is broken, and restaurant-like tables with sitting and top are attached. The tabletop laminate is separated with cracks and splits (photo evidence obtained). n) Observations in Sections #1, 2, 3 and 4 Bathrooms: Hallway bathrooms; vanity doors are deteriorating (doors have off particle board-like), the vanity inside has brown stains, tubs have what seems to be brown metal exposed and the sink is chipped and exposed to what seems to be metal-like and broken shower tiles near the tub (photo evidence obtained). o) Observation in Section #5 Bathroom: In # the toilet and door appear to be extremely close, preventing full access to the bathroom entrance (photo evidence obtained). On at approximately 5:00 PM an exit interview was conducted with the Administrator; she acknowledged the findings. No additional documents were provided at the time of the survey. Class III	A 152		
A 200	59A-36.025 FAC Emergency Environmental Control 59A-36.025 Emergency Environmental Control for Assisted Living Facilities. (1) DETAILED EMERGENCY ENVIRONMENTAL	A 200		

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A 200	Continued From page 5 CONTROL PLAN. Each assisted living facility shall prepare a detailed plan ("plan") to serve as a supplement to its Comprehensive Emergency Management Plan, to address emergency environmental control in the event of the loss of primary electrical power in that assisted living facility which includes the following information: (a) The acquisition of a sufficient alternate power source such as a generator(s), maintained at the assisted living facility, to ensure that current licensees of assisted living facilities will be equipped to ensure air temperatures will be maintained at or below 81 degrees Fahrenheit for a minimum of ninety-six (96) hours in the event of the loss of primary electrical power. 1. The required temperature must be maintained in an area or areas, determined by the assisted living facility, of sufficient size to maintain residents safely at all times and that is appropriate for resident care needs and life safety requirements. For planning purposes, no less than twenty (20) net square per resident must be provided. The assisted living facility may use eighty percent (80%) of its licensed bed capacity as the number of residents to be used in the to determine the required square footage. This may include areas that are less than the entire assisted living facility if the assisted living facility's comprehensive emergency management plan includes allowing a resident to congregate when he or she desires in portions of the building where temperatures will be maintained and includes procedures for monitoring residents for signs of heat related injury as required by this rule. This rule does not prohibit a facility from acting as a receiving provider for evacuees when the conditions stated in Section 408.821, F.S. and	A 200		

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A 200	Continued From page 6	A 200		

subsection 59A-36.019(5), F.A.C., are met. The plan shall include information regarding the area(s) within the assisted living facility where the required temperature will be maintained.
2. The alternate power source and fuel supply shall be located in an area(s) in accordance with local zoning and the Florida Building Code.
3. Each assisted living facility is unique in size; the types of care provided; the physical and mental capabilities and needs of residents; the type, frequency, and amount of services and care offered; and staffing characteristics. Accordingly, this rule does not limit the types of systems or equipment that may be used to achieve temperatures at or below 81 degrees Fahrenheit for a minimum of ninety-six (96) hours in the event of the loss of primary electrical power. The plan shall include information regarding the systems and equipment that will be used by the assisted living facility and the fuel required to operate the systems and equipment.
a. An assisted living facility in an evacuation zone pursuant to Chapter 252, F, S. must maintain an alternative power source and fuel as required by this subsection at all times when the assisted living facility is occupied but is permitted to utilize a mobile generator(s) to enable portability if evacuation is necessary.
b. Assisted living facilities located on a single campus with other facilities under common ownership, may share fuel, alternative power resources, and resident space available on the campus if such resources are sufficient to support the requirements of each facility's residents, as specified in this rule. Details regarding how resources will be shared and any necessary movement of residents must be clearly described

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A 200	Continued From page 7 in the emergency power plan. c. A multistory facility, whose comprehensive emergency management plan is to move residents to a higher floor during a flood or surge event, must place its alternative power source and all necessary additional equipment so it can safely operate in a location protected from flooding or storm surge damage. (b) The acquisition of sufficient fuel, and safe maintenance of that fuel at the facility, to ensure that in the event of the loss of primary electrical power there is sufficient fuel available for the alternate power source to maintain temperatures at or below 81 degrees Fahrenheit for a minimum of ninety-six (96) hours after the loss of primary electrical power during a declared state of emergency. The plan must include information regarding fuel source and fuel storage. 1. Facilities must store minimum amounts of fuel onsite as follows: a. A facility with a licensed capacity of 16 beds or less must store 48 hours of fuel onsite. b. A facility with a licensed capacity of 17 or more beds must store 72 hours of fuel onsite. 2. An assisted living facility located in an area in a declared state of emergency area pursuant to Section 252.36, F.S. that may impact primary power delivery must secure ninety-six (96) hours of fuel. The assisted living facility may utilize portable fuel storage containers for the remaining fuel necessary for ninety-six (96) hours during the period of a declared state of emergency. 3. Piped natural gas is an allowable fuel source and meets the onsite fuel supply requirements under this rule. 4. If local ordinances or other regulations limit the amount of onsite fuel storage for the assisted living	A 200		

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A 200	Continued From page 8	A 200		

facility's location, then the assisted living facility must develop a plan that includes maximum onsite fuel storage allowable by the ordinance or regulation and a reliable method to obtain the maximum additional fuel at least 24 hours prior to depletion of onsite fuel.
(c) The acquisition of services necessary to maintain, and test the equipment and its functions to ensure the safe and sufficient operation of the alternate power source maintained at the assisted living facility.
(d) The acquisition and maintenance of a monoxide alarm.
(2) SUBMISSION OF THE PLAN.
(a) Each new assisted living facility shall submit the plan required under this rule prior to obtaining a license.
(b) Each existing assisted living facility that undergoes any additions, modifications, alterations, refurbishment, renovations or reconstruction that require modification of its systems or equipment affecting the facility's compliance with this rule shall amend its plan and submit it to the county emergency management agency for review and approval.
(3) APPROVED PLANS.
(a) Each assisted living facility must maintain a copy of its approved plan in a manner that makes the plan readily available at the licensee's physical address for review by a legally authorized entity. If the plan is maintained in an electronic format, assisted living facility staff must be readily available to access and produce the plan. For purposes of this section, "readily available" means the ability to immediately produce the plan, either in electronic or paper format, upon request.
(b) Within 30 days of the approval of the plan from

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A 200	Continued From page 9	A 200		

the county emergency management agency, the assisted living facility shall submit in writing proof of the approval to the Agency for Health Care Administration to assistedliving@ahca.myflorida.com.
(c) The assisted living facility shall submit a consumer-friendly summary of the emergency power plan to the Agency. The Agency shall post the summary and notice of the approval and implementation of the assisted living facility emergency power plans on its website within ten (10) business days of the plan's approval by the county emergency management agency and update within ten (10) business days of implementation.
(4) IMPLEMENTATION OF THE PLAN.
(a) Each assisted living facility licensed prior to the effective date of this rule shall, no later than , , have implemented the plan required under this rule.
(b) Each new assisted living facility shall implement the plan required under this rule prior to obtaining a license.
(c) Existing assisted living facilities that undergo any additions, modifications, alterations, refurbishment, renovations or reconstruction that require modification of the systems or equipment affecting the assisted living facility's compliance with this rule shall implement its amended plan concurrent with any such additions, modifications, alterations, refurbishment, renovations or reconstruction.
(5) POLICIES AND PROCEDURES.
(a) Each assisted living facility shall develop and implement written policies and procedures to ensure that the assisted living facility can effectively and immediately activate, operate and

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A 200	Continued From page 10	A 200		

maintain the alternate power source and any fuel required for the operation of the alternate power source. The procedures shall ensure that residents do not experience complications from fluctuations in air temperatures inside the facility. Procedures must address the care of residents occupying the facility during a declared state of emergency, specifically, a description of the methods to be used to mitigate the potential for heat related injury including:
1. The use of cooling devices and equipment;
2. The use of refrigeration and freezers to produce ice and appropriate temperatures for the maintenance of medicines requiring refrigeration;
3. Wellness checks by assisted living facility staff to monitor for signs of , and heat injury; and
4. A provision for obtaining medical intervention from emergency services for residents whose life safety is in jeopardy.
(b) Each assisted living facility shall maintain the written policies and procedures in a manner that makes them readily available at the licensee's physical address for review by a legally authorized entity. If the policies and procedures are maintained in an electronic format, assisted living facility staff must be readily available to access the policies and procedures and produce the requested information. For purposes of this section, "readily available" means the ability to immediately produce the policies and procedures, either in electronic or paper format, upon request.
(c) The written policies and procedures must be readily available for inspection by each resident; each resident's legal representative, designee, surrogate, guardian, attorney in fact, or case manager; each resident's estate; and such

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additional parties as authorized in writing or by law.
(6) REVOCATION OF LICENSE, FINES OR SANCTIONS. For a violation of any part of this rule, the Agency for Health Care Administration may seek any remedy authorized by Chapter 429, Part I, or Chapter 408, Part II, F.S., including, but not limited to, license revocation, license suspension, and the imposition of administrative fines.
(7) COMPREHENSIVE EMERGENCY MANAGEMENT PLAN.
(a) Assisted living facilities whose comprehensive emergency management plan is to evacuate must comply with this rule.
(b) Each facility whose plan has been approved shall submit the plan as an addendum with any future submissions for approval of its comprehensive emergency management plan.
(8) NOTIFICATION.
(a) Within five (5) business days, each assisted living facility must notify in writing, unless permission for electronic communication has been granted, each resident and the resident's legal representative:
1. Upon the initial submission of the plan to the county emergency management agency that the plan has been submitted for review and approval;
2. Upon final implementation of the plan by the assisted living facility.
3. Annual submissions and approvals of the plan do not require notification to residents or their legal representatives unless a significant modification as defined in Rule 59A-36.019, F.A.C., has been made to the plan.
(b) Each assisted living facility must maintain a copy of each notification set forth in paragraph (a)

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A 200	Continued From page 12 above in a manner that makes each notification readily available at the licensee's physical address for review by a legally authorized entity. If the notifications are maintained in an electronic format, facility staff must be readily available to access and produce the notifications. For purposes of this section, "readily available" means the ability to immediately produce the notifications, either in electronic or paper format, upon request. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure their Emergency Environmental Control Plan (EECP) was up-to-date and approved by the Broward County Emergency Management Division. The Findings: Review of the facility Emergency Environmental Control Plan (EECP) file provided on , revealed missing notification of the EECP letter approval. The facility failed to provide a readily available letter approval Plan, either in electronic or paper format at the time of the survey. On at approximately 5:00 PM an exit interview was conducted with the Administrator; she acknowledged the findings. No additional documents were provided at the time of the survey. Class III	A 200		