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
	AL11970350	A. BUILDING: _____ B. WING _____	01/29/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOLY GARDEN ALF OF HOLLYWOOD	2904 N 36TH AVE HOLLYWOOD, FL 33021

(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 (capacity of 6 beds) and Generator monitoring survey was conducted on at Holy Garden ALF Of Hollywood. The facility had a deficiency identified 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 observation and interview, the facility failed to obtain local permits for modification and structure layout for 1 out of 5 rooms (#) and ensure all existing architectural, mechanical, electrical, and structural systems are registered with the proper agencies: City of Hollywood, City of Hollywood Fire Department, and Broward County Appraisal. The findings: A review on . . . . . of the Property Appraiser website for Broward County (www.bcpa.net) revealed the facility is a residential home listed with 4 bedrooms and 2.5 baths. On between 8:00 AM and 10:00 AM, this surveyor was provided a tour of the facility by the Administrator. The following observation was made at that time: Tour of the facility revealed 5 furnished bedrooms ( ). 4 bedrooms observed in the main portion of home (.,# ,# & #5). Observation of # , which is located on the south side of the home, revealed a garage that was converted into a room. The Administrator stated the room was an office before she bought the house, and she made it into a resident's room. This surveyor requested documents to support the conversion of the garage into a bedroom.	A 152		

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A 152	Continued From page 2 In an interview with the Administrator/owner on [redacted] at 11:30 AM, she stated she does not have a city permit to support garage conversion into a bedroom. This surveyor informed/reminded the administrator that all modifications to the facility structure layout must obtain local permits from the City and Fire Officials. She acknowledged the findings. Class III	A 152		