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
	AL11911669	A. BUILDING: _____ B. WING _____	01/29/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOMESTEAD VILLAGE RETIREMENT COMMUNITY	7830 PINE FOREST ROAD PENSACOLA, FL 32526

(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 unannounced complaint survey for complaint #2024015153 and #2025000232 was conducted at Homestead Village Retirement Community in Pensacola, FL on 01/29/2025. At the time of the survey, deficient practice was identified.	A 000		
A 152 SS=H	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 height to ensure easy access by the resident, 2. A closet or wardrobe space for hanging clothes, 3. A dresser, chest 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 threadbare. This Statute or Rule is not met as evidenced by: Based on observations, interviews, and contract reviews, the facility failed to maintain a safe living environment, free of hazards, and ensure that all existing architectural structures and appliances are maintained in good working order. The findings include: On 01/29/2025, during a tour of the facility in the kitchen for Buildings E and F, dust was observed on the ceiling around the exhaust fans and a piece of laminate to cover the particle board on the counter of a food preparation surface was loose, exposing the porous particle board to food which is not able to be properly disinfected. Additionally, the laundry room used for laundering resident clothing in Buildings E and F had a water heater that was covered in dust and a wadded paper towel. A large pipe in the corner was separated, and, where the separation occurred, there was blue duct tape on both sides of the separated pipe. The pipe appeared to be the exhaust from the dryer and there was a large amount of a gray, fuzzy substance on the pipe ends and on the wall near it. Behind the dryer, beneath the broken pipe was a small, white plastic trash bin and there was a large amount of the gray substance on it. An alcohol-based hand rub dispenser in the laundry room was also covered in the gray substance.	A 152		

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A 152	Continued From page 2 Staff A, a housekeeper, was interviewed at around 9:57 AM during these observations and verbalized being aware of roach and bed bug problems in Cottage I and said pest control has been out to work on it with heat treatment on the cottage, adding "they just came out today and they have to move residents." Staff A pointed out bags of trash observed outside on the street near the building and said it will stay there sometimes 2-3 weeks and that's how they get roaches. (photographic evidence obtained) At about 10:43 am, Staff D, a patient care technician (PCT), was interviewed. Staff D was aware of bed bugs in Cottage I for maybe a month since Staff D sometimes works there. Staff D said they came and heated the building but the facility provided no instructions to staff to prevent transfer of bed bugs. At 11:10 am, two maintenance workers, Staff E and Staff F, were observed driving a golf cart with a trailer covered in bags of trash. Staff E was interviewed and verbalized being aware of Building I having bed bugs for "maybe 3 months". He said a company treated the building but didn't get it fully fixed so there was another company heat treating during the survey. Both Staff E and Staff F said they were told to wear a bunny suit or wear short sleeve clothing and gloves. There was a large pile of trash outside Building D. They said this was not typical but a result of having no trash pick-up last week due to the winter storm. (photographic evidence obtained) At 12:37 pm, during a tour of Building K, two doors at the ends of halls with resident rooms were observed to have gaps allowing light through from the outside (photographic evidence obtained). The doors had key locks installed.	A 152		

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A 152	Continued From page 3 Staff M, a medication technician, was interviewed about this. She did not know how the door would be unlocked in the event of fire, and thought maintenance had keys. The resident shower room adjacent to the laundry area had the washing machine positioned so that the door to the laundry area did not close and remained open to the resident toilet/shower area. There were several missing floor tiles in this bathroom between the toilet and the shower and near the doorway to the laundry room. At 12:56, observations in Building J revealed the doors at the end of the halls where resident rooms were located did not seal, letting light through the openings. These doors had keyed locks holding them closed. Staff J, a medication technician said in an interview, "Don't know what I'd do to get people out if there was a fire and I needed to use this door." She was aware of problems with bed bugs in building I and said "they brought people in to heat it and get rid of stuff in there. They tried to wash some stuff. No information was provided to let employees know how to prevent spreading them and that's why no one wants to work in that building because we don't want to take them home. The residents there when I was there were not competent enough to complain." Staff J said they noticed the residents having bites, it looked like measles, like a rash. They (the bedbugs) were described as "huge, looked like ticks, and were in the common areas, rooms, not confined anywhere." At 1:14pm, an observation of a large piece of equipment with two large hoses going into windows and pillows stuffed around the hoses was made at Building I (photographic evidence obtained). Staff K, a medication technician, was interviewed inside Building I attending to Resident	A 152		

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A 152	Continued From page 4 #8 The resident was wandering and agitated, according to Staff K, because she couldn't return to her room which was being heat treated for bed bugs. Staff K said the rooms being treated were 3, 4, 11, and 12. Outside of room I-2 were two large garbage bags full of clothes on the floor and the bags were open (photographic evidence obtained). Staff K was not sure why the clothes were in the hallway, and said they were placed there by pest control. Staff K was not aware of why the clothes were in the hallway and not aware of whether they are contaminated or not. The doors at the end of the resident hallways also contained a key lock and poorly sealed doors. (photographic evidence obtained) At 2:04pm, in an interview, the Maintenance Director said there have been problems with the bed bugs and the facility has had three different companies treat the buildings. The third company was doing propane heat treatment at the time of the survey on 01/29/2025. The maintenance director said he just terminated the last company, adding "we've been working on this for several months, we've spent thousands and thousands of dollars and they didn't fix the problem. They did a liquid treatment and I always thought you treated with heat. We had no reports from nurses or family members, then it came back. The last time it came back I said let's heat it and get rid of it and I could see they were still there. They were using plug in heaters. So that's when we went with the other company." The maintenance director said the bugs were only in 4-5 rooms and hadn't been transferred to any other rooms. Residents would go to J building tomorrow so common areas could be treated.	A 152		

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A 152	Continued From page 5 When describing the bedbug infestation, the maintenance director explained, "you could just lift the mattress and the sheet up and we saw them. They walked us through on how to look for that. We all know how to look, and this (new) company will come back every week. They will also take over our preventive pest control for roaches and other things. That will be monthly." Regarding the trash observed around buildings, he said, "The maintenance workers had not yet been to Buildings D and F, they start at K and work their way back." The maintenance director said he was not aware of the problem with the dryer in the laundry area in Building E/F and said that needs to get fixed. He said he rounds every month and is in buildings every day but doesn't get work orders from Buildings E and F. The Executive Director was also present for this interview and agreed the company had obtained a contract for heat treating to eradicate bedbugs from Building I. During the interview with the Maintenance Director and the Executive Director, both confirmed that the doors in Buildings K, J, and I had keyed locks on exit doors, but they "weren't supposed to be locked." They also agreed that staff did not have access to keys and only the Maintenance Director, Executive Director, and Director of Nursing or nursing supervisors had keys. The Executive Director said this was because staff would lose the keys. The Maintenance Director and Executive Director agreed this was a fire hazard, but the Maintenance Director said the fire inspector was aware of the locks and approved them. The Maintenance Director also agreed he would remove them, as it was unsafe. The Maintenance Director explained the locks were placed on the	A 152		

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A 152	Continued From page 6 doors because the doors don't seal and will blow open. A review of pest control invoices included a pest control invoice documenting a charge of $3200.00 on 10/01/2024 for bedbugs liquid treatment in Building I. An invoice dated 10/09/2024 for $376.29 documented liquid treatment for bedbugs in Unit F9. Invoices documented $1000.00 for community pest control 4 times monthly on each of the following dates: 10/1/2024, 11/05/2024, and 12/03/2024. A proposed contract for bedbug heat treatment in the amount of $9000.00 was provided for review and dated 01/20/2025, but the contract was not signed by anyone from the facility and lines indicating a signature for the tenant and property manager were blank. A proposed price for "pest control" specialty services in the amount of $4000.00 was provided, but did not contain a signature or any indication this was for treating bedbugs. The contract was 8 pages total and page 2 of the contract included language specifically indicating the service was for 4 preventative treatments per year and the following statement: "The Pest Prevention Program covers the customer for the prevention of structurally infesting insects excluding wood destroying insects such as termites & powder post beetles, bed bugs. This service includes 4 preventive pest services per year. This service focuses on exterior treatment, only requiring interior treatment when an active problem exists." On page 3, under "terms and conditions" the contract indicates "we cannot treat inside, per the product labels we use as a company, unless interior pest problems exist." Class II	A 152		

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