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
	AL11965970	A. BUILDING: _____ B. WING _____	07/10/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SHADY OAKS REST HOME	1208 KENNEDY RD DAYTONA BEACH, FL 32117

(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 2025009712 along with a generator monitoring, was conducted at Shady Oaks Rest Home from to . Deficiencies were identified in the complaint survey. Class I deficiencies were found at Tags 0030. A Class I deficiency is a deficiency that the agency determines presents a situation in which immediate corrective action is necessary because the facility's noncompliance has caused, or is likely to cause, serious injury, harm, , , or to a resident receiving care in a facility. The facility failed to maintain a safe living environment for 7 of 7 residents who experienced indoor temperatures above the regulatory limit. The facility's Administrator was notified of the Class I noncompliance on at 5:08pm. The census at the start of the survey was 7. The following is a description of the deficiencies found at the time of the visit.	A 000		
A 030	59A-36.007(5) FAC; 429.28( ) FS 429.27 Resident Care - Rights & Facility Procedures 59A-36.007 (5) RESIDENT RIGHTS AND FACILITY PROCEDURES. (a) A copy of the Resident Bill of Rights as described in Section 429.28, F.S., or a summary provided by the Long-Term Care Ombudsman Program must be posted in full view in a freely accessible resident area, and included in the	A 030		

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A 030	Continued From page 1 admission package provided pursuant to Rule 59A-36.006, F.A.C. (b) In accordance with Section 429.28, F.S., the facility must have a written grievance procedure for receiving and responding to resident complaints and a written procedure to allow residents to recommend changes to facility policies and procedures. The facility must be able to demonstrate that such procedure is implemented upon receipt of a complaint. (c) The telephone number for lodging complaints against a facility or facility staff must be posted in full view in a common area accessible to all residents. The telephone numbers are: the Long-Term Care Ombudsman Program, 1(888)831-0404; , Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida Hotline, 1(800)96- or 1(800)962-2873. The telephone numbers must be posted in close proximity to a telephone accessible by residents and the text must be a minimum of 14-point font. (d) The facility must have a written statement of its house rules and procedures that must be included in the admission package provided pursuant to Rule 59A-36.006, F.A.C. The rules and procedures must at a minimum address the facility's policies regarding: 1. Resident responsibilities; 2. and tobacco use; 3. Medication storage; 4. Resident elopement; 5. Reporting resident , neglect, and , ; 6. Administrative and housekeeping schedules and requirements; 7. control, sanitation, and standard precautions;	A 030		

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A 030	Continued From page 2 8. The requirements for coordinating the delivery of services to residents by third party providers; 9. Assistive devices; and 10. Physical . (e) Residents may not be required to perform any work in the facility without compensation. Residents may be required to clean their own sleeping areas or apartments if the facility rules or the facility contract includes such a requirement. If a resident is employed by the facility, the resident must be compensated in compliance with state and federal wage laws. (f) The facility must provide residents with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication, pursuant to Section 429.28(1)(d), F.S. The facility must allow unidentified telephone calls to residents. For facilities with a licensed capacity of 17 or more residents in which residents do not have private telephones, there must be, at a minimum, a readily accessible telephone on each floor of each building where residents reside. 429.28 Resident bill of rights.- (1) No resident of a facility shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law, the Constitution of the State of Florida, or the Constitution of the United States as a resident of a facility. Every resident of a facility shall have the right to: (a) Live in a safe and decent living environment, free from and neglect. (b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy. (c) Retain and use his or her own clothes and other personal property in his or her immediate living quarters, so as to maintain individuality and	A 030		

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A 030	Continued From page 3 personal dignity, except when the facility can demonstrate that such would be unsafe, impractical, or an infringement upon the rights of other residents. (d) Unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum. Upon request, the facility shall make provisions to extend visiting hours for caregivers and out-of-town guests, and in other similar situations. (e) Freedom to participate in and benefit from community services and activities and to pursue the highest possible level of independence, autonomy, and interaction within the community. (f) Manage his or her financial affairs unless the resident or, if applicable, the resident's representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as provided in s. 429.27. (g) Share a room with his or her spouse if both are residents of the facility. (h) Reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals except when prevented by inclement weather. (i) Exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, nor any attendance at religious services, shall be imposed upon any resident. (j) Assistance with obtaining access to adequate and appropriate health care. For purposes of this paragraph, the term "adequate and appropriate health care" means the management of medications, assistance in making , ,	A 030		

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A 030	Continued From page 4 for health care services, the provision of or arrangement of transportation to health care , , , and the performance of health care services in accordance with s. 429.255 which are consistent with established and recognized standards within the community. (k) At least 45 days' notice of relocation or termination of residency from the facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally , , the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for relocation must be set forth in writing and provided to the resident or the resident's legal representative. The notice must state that the resident may contact the State Long-Term Care Ombudsman Program for assistance with relocation and must include the statewide toll-free telephone number of the program. In order for a facility to terminate the residency of an individual without notice as provided herein, the facility shall show good cause in a court of competent jurisdiction. (l) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without , interference, coercion, discrimination, or reprisal. Each facility shall establish a grievance procedure to facilitate the residents' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or special interest groups.	A 030		

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A 030	Continued From page 5 (2) The administrator of a facility shall ensure that a written notice of the rights, , and prohibitions set forth in this part is posted in a prominent place in each facility and read or explained to residents who cannot read. The notice must include the statewide toll-free telephone number and e-mail address of the State Long-Term Care Ombudsman Program and the telephone number of the local ombudsman council, the Elder Hotline operated by the Department of Children and Families, and, if applicable, Rights Florida, where complaints may be lodged. The notice must state that a complaint made to the Office of State Long-Term Care Ombudsman or a local long-term care ombudsman council, the names and identities of the residents involved in the complaint, and the identity of complainants are kept confidential pursuant to s. 400.0077 and that retaliatory action cannot be taken against a resident for presenting grievances or for exercising any other resident right. The facility must ensure a resident's access to a telephone to call the State Long-Term Care Ombudsman Program or local ombudsman council, the Elder Hotline operated by the Department of Children and Families, and Rights Florida. 429.27 Property and personal affairs of residents.- (1)(a) A resident shall be given the option of using his or her own belongings, as space permits; choosing his or her roommate; and, whenever possible, unless the resident is adjudicated . or . under state law, managing his or her own affairs. (b) The admission of a resident to a facility and his or her presence therein shall not confer on the	A 030		

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A 030	Continued From page 6 facility or its owner, administrator, employees, or representatives any authority to manage, use, or dispose of any property of the resident; nor shall such admission or presence confer on any of such persons any authority or responsibility for the personal affairs of the resident, except that which may be necessary for the safe management of the facility or for the safety of the resident. This Statute or Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to provide a safe living environment for seven of seven residents who were subjected to excessive heat (above 81 degrees) and a delay in intervention from facility staff to prevent further exposure. The facility failed to ensure building maintenance was performed timely to ensure a homelike environment for the residents. The findings include: 1. On at 3:00 pm a telephone conversation was held with a representative from the Long Term Care Ombudsman Office who stated they were at the facility and the building was 84 degrees. Concerns voiced were that the air conditioner (AC) was not on and the Administrator had to be asked to turn it on during the visit. There were also concerns about a general lack of maintenance and upkeep for a safe living environment. During an observation of the facility on at 11:52 am, the temperature reading in the facility's office area, using the Agency issued hygrometer, was 84 degrees.	A 030		

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A 030	Continued From page 7 Photographic evidence obtained. At 12:10 pm on , Resident 3's bedroom (Bedroom 3) was observed to be 89 degrees. The window AC unit was on upon entry to the room. Her bathroom door was located within her bedroom, which was shared with vacant Bedroom 2. The bathroom was also observed to be 89 degrees. Resident 3's record showed she was admitted to the facility on . Diagnoses included failure and . She needed total assistance for bathing, and required assistance with and grooming. Bedroom 6 was assigned to Resident 2 and Resident 5. The temperature readings on the hygrometer at 12:25 pm on read 84.9 degrees while standing in front of the window AC unit, which was already on prior to entry to the room. Resident 2 was in the room at the time of the observation. Photographic evidence obtained. Resident 2's record showed she was admitted on . Her diagnoses included and . Resident 5's record indicated diagnoses of hypoxemia, , and . She was admitted . The hallway bathroom across from Bedroom 7, used by Resident 6, was observed at 12:30 pm on . The temperature in the bathroom was 87 degrees. Photographic evidence obtained. Resident 6's record showed he was admitted on . He was diagnosed with	A 030		

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A 030	Continued From page 8 and , . Bedroom 8, located off the dining room and assigned to Resident 1, was observed on at 12:34 pm. Resident 1 was in the room at the time. The temperature was 85 degrees while standing under the ceiling vent next to his bed. While standing in front of the window unit, which was on before entering the room, the reading on the hygrometer was 86 degrees. Photographic evidence obtained. Resident 1's record showed he was diagnosed with , , , , , and , . He was admitted . At 12:38 pm on , both the Administrator and Employee A were unaware of the high temperatures and expressed surprise when the earlier hygrometer readings were reviewed, as well as the expectation to keep the building cooled to 81 degrees or below. Resident 6's room (Bedroom 7) was observed with the Administrator and Employee A on at 12:45 pm. Before entering, the door was shut, and as they opened it, both explained Resident 6 didn't like air conditioning. Upon entry into the room it was noticeably warmer than the other areas. The window unit was not on at the time of entry, and the Administrator had to move the dresser to plug it in before turning it on. The hygrometer read 86 and moved to 87 degrees during the interview before the window unit was initiated. They were asked why the central AC wouldn't be cooling the room down if the window unit wasn't on. The ceiling vents were observed to be shut. At 12:48 pm on , Resident 6 entered the room where the window AC was now on but did not comment.	A 030		

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A 030	Continued From page 9 His window unit was set to 72 during the interview. They were again advised it needed to be at 81 degrees or below. Photographic evidence obtained. At 12:55 pm on , the Administrator was asked what the thermostat, located in the dining room, was set to. It was located behind a locked case and read 82 at the time if the interview. It used a slider knob at the bottom, and the Administrator moved it from "cool" to "off" during the interview. He then started pushing the up/down buttons that manipulated the temperature settings, but nothing happened. He said it was broken. He was again advised at this time the building needed to be 81 degrees or below. After pointing out to the Administrator several times that he had turned the thermostat off, Employee A arrived and turned it to cool, and turned the temperature down. Photographic evidence obtained. At 12:58pm on , observations were made with Employee A present, including the TV area and the front bedroom belonging to Resident 7. The hygrometer read 85 degrees in Resident 7's room. One of the walls in this room was comprised primarily Jalousie style windows which open at a slant, by crank, and there was no ancillary window AC unit, only a box fan. Employee A explained she turned the thermostat down to 75. She was advised the temperatures needed to come down to 81 or below, and after having the central AC down to 75, a temperature re-check would occur later in the day. She expressed understanding. Resident 7's record showed an admission date of . Diagnoses included and .	A 030		

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A 030	Continued From page 10	A 030		

At 1:33 pm on , the Administrator was asked to provide a copy of the facility's emergency management plan. He stated someone else had it and it wasn't onsite. Employee A called Employee B, and he explained via phone that he had it with him offsite, but he would email it to the facility. He stated it only spoke to hurricanes. It was reviewed on the facility's laptop.

Details of the facility's Comprehensive Emergency Management Plan (CEMP) included a section about facility evacuation beginning on page 18. The Administrator or designee were tasked with implementing the evacuation. The CEMP contained a mutual aid agreement with another local assisted living facility. Section C. 7 stated "it is estimated that it will take hours to successfully evacuate all residents and essential supplies" to the host facility.

Section C. 10 stated that if possible, residents would be provided with enough time to pack personal belongings to be gone up to 72 hours. Section C. 13 indicated the Administrator would instruct staff to prepare for evacuation and "pre-position" supplies in advance of the evacuation if they had advance notice of the need.

Section C 14. stated the instruction to evacuate may be advised by outside agencies and once that decision was made, the Administrator would immediately notify the host facility to advise them of the need to shelter. Photographic evidence obtained.

While reviewing facility records in the office area at 1:43 pm on , the temperature was

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A 030	Continued From page 11 84.9 degrees on the Agency issued hygrometer. Review of the National Weather Service's (NW'S) website at the time of the reading showed it was 90 degrees in the area. At 2:04 pm on , an hour after Employee A turned the central AC down, the process of taking additional observations with the Agency issued hygrometer commenced, while accompanied by Employee A, who was taking notes during the observations. At 2:04 pm, Bedroom 3 was 83.4 degrees. The window AC unit was on prior to entry. The Administrator was present and stated he thought her room was warm because they weren't running the AC in the vacant room (Bedroom 2) that shared a bathroom with Bedroom 3. At 2:13 pm, Bedroom 6 was 83 degrees. Photographic evidence obtained. The window AC unit was on prior to entry. When asked about maintenance issues with the central AC, Employee A stated about three days prior it wasn't running so they had to have someone do repair work. When asked for that documentation, she said there wasn't any, because it was done by an acquaintance and not through a hired vendor. She said he "did a few things and it started again." At 2:15 pm, the bathroom across from Bedroom 7 was 84.7 degrees. At 2:27 pm, Bedroom 7 was 86.5 degrees. The window unit was on prior to entry, and Resident 6 was asleep in his bed at the time. At 2:30 pm, Bedroom 8 was 83.4 degrees while standing next to the bed which was under the	A 030		

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A 030	Continued From page 12 ceiling vent. While standing directly in front of the window AC, which was on prior to entry, the reading was 82.7. Resident 1 was in his bed at the time. At 2:32 pm the thermostat was still reading 82 degrees. The TV room where Resident 7 and Resident 2 were showed as 84.3 degrees on the Agency issued hygrometer. Photographic evidence obtained. The Administrator and Employee A were informed in an interview at 2:42 pm on that despite turning the central AC down, temperatures were still too high during the last set of observations, approximately an hour and a half after reducing the central AC setting. The Administrator said it was not that bad and he should just get a statement of deficiencies and he would respond after that with corrections. After explaining the regulatory requirements and the need for residents to be in a setting that was 81 degrees or below, Employee A called Employee B. Employee B was then advised via phone of the temperatures at the last observation and was told residents needed to be in a setting that was 81 degrees or below. He stated they were going to attempt one more thing before initiating an evacuation of residents. The Administrator then stated he was going to buy more units. He asked which areas needed to be cooled and was again told all the resident areas were reading too high. It was not clear what he said he was purchasing, but he was told that all areas the residents occupy, not just bedrooms, needed to be 81 degrees or below. He exited the facility.	A 030		

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A 030	Continued From page 13 At 3:53 pm on the Administrator returned and stated he bought more window Ac units and they were observed being brought in the the building at that time. At 4:22pm on , the Administrator and Employee A were in the office area. This area was surrounded by other hallways and rooms and did not have a window. The Administrator was observed setting up the new freestanding portable air conditioning unit here. It released air out of the top, and had a vent/exhaust system on its . Photographic evidence obtained. He asked Employee A where the plug was, and she responded by pointing out it had to have a way to exhaust out of the building. She said it twice but he did not respond. He plugged the unit in and expressed satisfaction with the air being produced. When asked again by the surveyor about the exhaust (because this was just plugged into a wall without setting up the venting) Employee A called Employee B and explained the unit was set up without being vented out. She handed the phone to the Administrator, and after a brief conversation, the Administrator turned off the unit and said it needed to have the exhaust set up. Resident 2 entered the office area at 4:31 pm on and expressed gratitude for the facility getting more air conditioning. At 4:32 pm on , additional observations were started with the Agency issued hygrometer which were as follows. Employee A was present during the observations. At 4:35pm, Bedroom 3 and its bathroom were both reading 82 degrees. The window AC unit was operating during the operation.	A 030		

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	AL11965970	A. BUILDING: _____ B. WING _____	07/10/2025

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A 030	Continued From page 14 At 4:38pm, Bedroom 6 was 83.3 degrees Resident 5 was in the room in front of a fan which she confirmed helped her stay cool. At 4:40pm, the bathroom across from Bedroom 7 was reading 83.3. Bedroom 7 was reading 83.4 degrees. The window AC unit was on at the time of the observation. At 4:41pm, while standing directly in front of the window AC in Bedroom 8, the reading was 83.3 degrees. At 4:42 pm, Resident 7 and Resident 3 were in the TV room. The reading was 83.1 in this area. At 4:50pm, the office area was 83 degrees. Photographic evidence obtained. An observation was made at 5:08 pm on of the Administrator and Employee A attempting to install the portable stand-alone unit in Resident 7's front bedroom with the slanted Jalousie style windows. Because the windows contained several rows of horizontal slats that all opened , they were unable to just one row to vent the AC out of. Opening the window to vent it out meant the rest of the windows were also open to the elements. At 5:10 pm on during an interview with the Administrator and Employee A, they were advised the rooms were still too warm at the last observations. The Administrator denied the temperatures were an issue and said he wanted to wait until the findings were sent in the mail after the survey to address the issues. Again, the regulatory requirements were reviewed. He	A 030		

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A 030	Continued From page 15	A 030		

complained about having to buy and install additional devices to bring temperatures down. There was no indication they were preparing for potential evacuation according to their CEMP.

Employee A explained at 11:27am on that they had not yet decided where to put the additional window units that were purchased on . They were observed in their boxes on the hallway where they were seen the day before. They spent the evening before rearranging some beds and stated they had a plan to install curtains. In the office area, the portable stand-alone unit was in a corner next to the fire extinguisher. They used shiny metal tubing that was taped to the vent and it extended into the ceiling. This was not the tubing/exhaust system that came with the device. Photographic evidence obtained.

Review of the manual for the Whynter Inverter Dual Hose Portable Air Conditioner showed a list of safety precautions. Only the included accessories and parts, and specific tools, were to be used with the unit to avoid damage, , fire, or injury. There should be a 36 inch clearance around the unit, and the area shouldn't contain combustible items such as fire extinguishers. Photographic evidence obtained.

At 1:23pm on , a request was made for any policies and procedures related to the use of the generator, or resident wellness checks to prevent heat related illness. Nothing directed staff on what to do in the event resident health was in jeopardy due to heat related injury. Nothing detailed what the appropriate temperatures were supposed to be in the facility for staff to be able to reference. Employee A

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A 030	Continued From page 16 verbally explained how they would use the generator, so she was asked where these policies were written. She did not know, and called Employee B. Via phone, Employee B was asked to produce the written policies and procedures that weren't located the day before. He said what was requested would be in the CEMP he emailed yesterday and if not, he would have to add them. A second review was done of the CEMP at this time and the information was again not located. Review of NWS data showed that on the high was 88 degrees. On the high was 90 degrees. On the high was 93 degrees. On - , the high was 91 degrees. 2. Upon entry to the facility on at 10:45am, a brief tour commenced. Resident 4 was in his bedroom (Bedroom 1) watching television. When asked if he had any concerns with the physical environment, he stated there was no hot water in his bathroom sink. He explained several weeks to a month ago it was leaking so the Administrator shut it off and it hasn't been turned on. Review of Resident 4's record showed he was admitted to the facility on . Diagnoses included , and , . At 12:10 pm on , Resident 3's bathroom was observed. Next to the toilet was a grab bar installed on the wall with chipped paint and heavily rusted metal. The baseboard was unattached and leaning vertically against the wall	A 030		

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A 030	Continued From page 17	A 030		

behind the toilet. Photographic evidence obtained. The sink was located outside of the toilet area near Resident 3's bed. There was no hot water.

Employee A, LPN, was asked about the state of the bathroom at 12:19 pm on . She removed the piece of baseboard from the bathroom and acknowledged the grab bar was rusted.

The hallway bathroom across from Bedroom 7, used by Resident 6, was observed at 12:30 pm on . A grab bar next to the toilet, mounted on the floor, was unpainted and covered in rust. The floor around the toilet was stained brown. The toilet seat was worn and the plunger on the tank was chipped. The temperature in the bathroom was 87 degrees. Photographic evidence obtained.

Resident 1's bathroom was observed at 12:35pm on . This bathroom was also used by Resident 7. The floor and grout around the toilet were soiled and discolored. The bathtub was peeling heavily around the drainpipe and surrounding wall. There were two sinks. The grout around these sinks was discolored. The door to the under-sink storage area was missing and a black garbage can was observed under the drain pipe. Photographic evidence obtained.

At 12:38 pm on , the Administrator was asked about the previous observations in Resident #'3s bedroom/bathroom. When asked about the temperature of the water, the Administrator said he shut off the hot water because he felt she was too to have it. He stated he would paint the rusted grab bar. He did not comment when asked about the

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A 030	Continued From page 18 baseboard. A second observation Resident 6's bathroom was conducted on at 12:44 pm. When asked about the brown staining on the floor, Employee A explained she had already scrubbed the floor. At 2:42 pm on the Administrator expressed he would use the Agency's findings when they were listed in the statement of deficiencies to make corrections. On at 11:21 am, an observation of Bedroom 1 was conducted with the Administrator present. He was asked about the hot water being shut off in the room since Resident 4 stated the Administrator cut it off due to a leak. The Administrator did not provide any details about the leak and did not appear to recall the issue. Resident 4 was present and reminded the Administrator that, "you shut it off." The Administrator got under the sink in an attempt to turn it on, was unsuccessful, so asked Resident 4 to get down under the sink to try and turn it on. Neither were successful and the Administrator explained he would have to get his tools and left the room. Class I	A 030		