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
	AL11911449	A. BUILDING: _____ B. WING _____	10/17/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PLAZA OF HALLANDALE BEACH	3535 SW 52ND AVENUE PEMBROKE PARK, FL 33023

(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 (#2023010422, #2023011470, #2023015377, #2024003367) was conducted on through at Plaza of Hallandale Beach. The facility had deficiencies related to the Complaints (#2023010422, #2023011470, #2023015377, #2024003367) 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	A 152		

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A 152	Continued From page 1 keys to resident bedrooms to be used in the event of an emergency. (d) Residents who use portable bedside 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, interview and record review, the facility failed to ensure a safe living environment free of a moldlike substance. And to ensure that furniture used by residents was in good condition free of stains, rips, tears, etc. for ninety-nine (99) residents. The Findings Include: During the tour of the facility by this surveyor on and observation was made of mold-like substances on ceilings tiles and air-condition vents in various locations of the facility as follows: On at 12:07 PM - A mold-like substance was observed on ceiling tiles located in a first-floor hallway located on the North side near the middle of the facility that leading to the outside to the patio (photo evidence obtained). On at 12:37 PM - Mold-like substance was observed on ceiling tiles over the fireplace located in the large opened common area in North section of the second floor (photo evidence obtained). On at 12:43 PM - Observation was	A 152		

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A 152	Continued From page 2 made of mold-like substance on ceiling tile located over . On at 12:46 PM - Observation made of mold-like substance on ceiling tile/vent located in an area in the North section near the storage room (photo evidence obtained). On at 12:49 PM - Observation was made of water-stained ceiling tile by the vent in the Activity Room by the Northeast door (photo evidence obtained). In an interview with the Administrator on at 10:53 AM, she stated they do have mold in the ceilings. She stated they have a "big old pipe" in the entire building that has to be replaced. She stated it's a $100,000.00 project and they (corporate) are working on it. She stated (Plumbing Company) has come several times and they informed them that they would have to , the current plumbing and re-do the entire plumbing system to fix it. This surveyor requested a copy of the assessment/estimate request was made for the evaluation. It was not provided during the survey. During the tour of the facility on at 12:41 PM, this surveyor observed a very strong -like smell in the 2nd floor hallway, just East of the receptionist desk. Observation was also made of a fowl -like smell emanating from . This surveyor did not observe the room as the smell was too overbearing to enter the room. Additionally, during the tour of the facility observation was made of the couches and chairs located in the two large open common areas on the second floor just off the elevators.	A 152		

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A 152	Continued From page 3 Observation of the three suede-like couches revealed they were soiled. Observation of the leather-like recliner revealed it was worn and had some peeling. Observation was also made of a two-seater suede-leather-like couch that had obvious signs of wear, soiling and peeling (Photo evidence obtained). In an interview with the Administrator on at 1:41 PM, she acknowledged the finding and stated they would be replacing the chairs identified by this surveyor and any that needs to be replaced. On at 1:52 PM this surveyor met with the Administrator to conduct the Exit Conference. She was informed of the findings of the survey. She acknowledged the findings. Class III	A 152		