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
	AL11911437	A. BUILDING _____ B. WING _____	R

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PLYMOUTH HOME FOR ADULTS	3225 PLYMOUTH STREET JACKSONVILLE, FL 32205

(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 follow-up survey was conducted at Plymouth Home in Jacksonville, Florida on . 2013. Licensure deficiencies were identified as result of the survey.	{A 000}		
A 030	58A-5.0182(6) FAC; 429.28 FS Resident Care - Rights & Facility Procedures (6) 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 Council shall be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C. (b) In accordance with Section 429.28, F.S., the facility shall have a written grievance procedure for receiving and responding to resident complaints, and for 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 address and telephone number for lodging complaints against a facility or facility staff shall be posted in full view in a common area accessible to all residents. The addresses and telephone numbers are: the District Long-Term Care Ombudsman Council, 1(888)831-0404; the Advocacy Center for Persons with 1(800)342-0823; the Florida Local Advocacy Council, 1(800)342-0825; and the Agency Consumer Hotline 1(888)419-3456. (d) The statewide toll-free telephone number of the Florida Hotline " 1(800)9€ or 1(800)962-2873 " shall be posted in full view in a common area accessible to all residents.	A 030		

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A 030	Continued From page 1 (e) The facility shall have a written statement of its house rules and procedures which shall be included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C. The rules and procedures shall address the facility ' s policies with respect to such issues, for example, as resident responsibilities, the facility ' s [illegible] and tobacco policy, medication storage, the delivery of services to residents by third party providers, resident elopement, and other administrative and housekeeping practices, schedules, and requirements. (f) Residents may not be required to perform any work in the facility without compensation, except that facility rules or the facility contract may include a requirement that residents be responsible for cleaning their own sleeping areas or apartments. If a resident is employed by the facility, the resident shall be compensated, at a minimum, at an hourly wage consistent with the federal minimum wage law. (g) The facility shall 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 shall not prohibit 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 shall be, at a minimum, an accessible telephone on each floor of each building where residents reside. (h) Pursuant to Section 429.41, F.S., the use of physical [illegible] shall be limited to half-bed rails, and only upon the written order of the resident ' s physician, who shall review the order biannually, and the consent of the resident or the resident ' s representative. Any device, including half-bed rails, which the resident chooses to use and can remove or avoid without assistance shall	A 030		

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A 030	Continued From page 2 not be considered a physical 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 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 achieve 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.	A 030		

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A 030	Continued From page 3	A 030		

(g) Share a [illegible] 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) Access to adequate and appropriate health care 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 shall be set forth in writing. 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

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A 030	Continued From page 4 special interest groups. This Statute or Rule is not met as evidenced by: Based on tour observation, staff interview and resident interview, it was determined that the Assisted Living Facility failed to ensure that residents rights' to a safe and decent living environment was protected. The findings include: 1. On . . . . . a follow-up monitoring visit was conducted. During the course of tour of the facility it was determined that the Assisted Living Facility (ALF) failed to provide a clean and safe living environment that is free of hazards, and that all existing architectural and structural systems were maintained in good working order in 30 of 36 resident . . . . . and 5 of 13 facility . . . . . The facility also failed to provide residents clean linens for their beds. (Photos attained) 2. On . . . . . a tour of the facility from 2:45 pm to 4:30 pm revealed the ALF failed to maintain a clean and sanitary environment for residents. The facility failed to provide operable mechanical devices, clean operable and appropriate furnishings in good working order. The AHCA surveyor observed approximately 30 of 36 . . . . . and 5 of 13 . . . . . with the following discrepancy patterns: a. . . . . observed with damaged or deteriorating dressers for storage of resident's clothes. b. . . . . observed with unfinished and damaged repair plaster work on walls and	A 030		

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A 030	Continued From page 5 baseboards. c. majority of observed with dirty floors, damaged tile or wooden floor and dirt and grime in crevices. d. were observed with dirty,worn linens and had rusted legs and frames. e. were stained and had damaged or deteriorating floor covering. f. were observed with dirty, clogged vents. g. Several door knobs were broken and had damaged door frames. 2. Surveyor observed the following: Building 1 a. Front porch entrance observed with unsteady wood base flooring. b. down stairs had plaster and unfinished repairs on ceiling and on walls. above shower deteriorating. missing ceiling vent. c. closet door does not fit its frame Door would not close properly and door knob missing from door. d. missing closet door. Closet door was observed sitting behind entrance door. e. Floors stained and dirty throughout building. f. Cracked, damaged walls, dirty floors and trash debris observed on floors throughout building 1, 2, 10, 11, 14, 15, 16, 17, 18, 19, and 20. g. Foul odors and smell of dirty laundry with dirty worn linens throughout building 10, 11, 14, 15, 16, 17, 18, 19, and 20. h. 1 of 5 couches in main living torn and/or worn areas. i. Floor in living near a/c unit. j. broken dressers and damaged and deteriorating baseboards k. Dirty vents throughout building, observed with	A 030		

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A 030	Continued From page 6 dirt and trash debris l. observed with no closet door-just an exposed rod m. storage with damaged wall connection, toilet back lid missing n. to missing ceiling vent o. broken dresser drawers p. broken dresser Building # 2 q. observed with foul odors with dirty floors,trash debris and dirty/worn linens, and stained floors in 2,3,6, Building 3 r. Porch light fixture broken s. 1,2,3,4,5, 9 with unfinished plaster repairs on walls. Dirty/worn linens, floors and vents, peeling ceilings. t. from observed with damaged vanity and mirror. u. upstairs 94, 83, 81, 82, & 84, with damaged flooring, foul odors, chipped paint, v. observed with dirty tiles on with foul odors 3. In an interview on at 3:00 pm with Resident #1, she stated she did not like the idea, that her always dirty and had damaged furnishings. She stated the could be cleaned better. 4. In an interview on at 3:15 pm with Employee A during the tour of she acknowledged facility and were in need of cleaning and repair and that the process was an ongoing one. She stated she would be talking with housekeepers regarding cleaning duties.	A 030		

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A 030	Continued From page 7 5. In an interview on pm at approximately 4:15 pm with the Administrator he stated he knows of the facility's cleaning and repair issues. He stated to fix the violations within the facility he hired a contractor that did not do a good job and he is now in the process of having the work redone by more contractors. He stated the process is an ongoing costly job. H stated Code enforcement came out on , 2012 and issued him a statement of violation and hearing to go to court in front of a Special Magistrate on . 2013. He stated he has had a lot of repair work done, but understands it's not enough. Class III	A 030		
{A 152}	58A-5.023(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.; and 2. Must be maintained free of hazards; and 3. Must 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 shall be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident 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 a comfortable	{A 152}		

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{A 152}	Continued From page 8 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 personal effects; 4. A table, 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 . 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 shall be free of tears, stains and not be This Statute or Rule is not met as evidenced by: Based on observation, interview, and record review it was determined that the Assisted Living Facility (ALF) failed to ensure all electrical systems, existing architectural structures and buildings were maintained in good order and repair to provide a safe environment free from hazards for its residents. The findings include: 1. On at approximately 2:30 pm, a follow-up survey was conducted. During the tour numerous building code violations still existed from the previous survey. During tour, 30 of 36 and 5 of 13 were observed with deficiencies.	{A 152}		

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{A 152}	Continued From page 9 Jacksonville Municipal Code Compliance Division reinspected the facility on [redacted] Municipal code found facility in violation of the below listed codes. Municipal Code issued the facility a statement of violation and request for hearing before a Special Magistrate due to the belief the violation presents a serious threat to public health, safety, and welfare of the owner, occupant or general public. Hearing before Special Magistrate set for [redacted] at 10:00 am Statement of violation and request for hearing letters attained for file. Municipal Code recent re-inspection on [redacted] identified below existing violations: A reinspection from Municipal Code Compliance Division was held on [redacted] with the following violations: Building 1 located at 3225 Plymouth Street Entire building wall trim deteriorated or otherwise unsound. Entire building fascia baseboards are deteriorated,damaged or otherwise unsound Entire building fascia and or eaves needs protective coating Front wall trim deteriorated or otherwise unsound Throughout building floor-covering material deteriorated or damaged Throughout building flooring deteriorated or damaged [redacted] floor-covering material is deteriorated or damaged Throughout building failure to provide paint wall paper, or other protective coverings for walls and ceilings Ceiling throughout failure to provide paint, paper, or other protective coverings for walls and ceilings	{A 152}		

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{A 152}	Continued From page 10 Building 2 located at 3211 Plymouth Street Hallway smoke detectors are or defective Building 3 located at 3205 Plymouth Street Front door exterior doors and or screen door deteriorated, damaged or otherwise unsound Exterior door doors does not fit properly within its frame. 2. During tour on from 2:55 pm to 4:00 pm the following was observed: Building 1-women's section Front porch entrance observed with unsteady wood base flooring. down stairs had plaster and unfinished repairs on ceiling and on walls. above shower deteriorating. missing ceiling vent. closet door does not fit its frame. Door would not close properly and door knob missing from door. missing closet door. Closet door was observed sitting behind entrance door. Floors stained and dirty throughout building. Cracked, damaged walls dirty floors and trash debris observed on floors throughout building 1, 2, 10, 11, 14, 15, 16, 17, 18, 19, and 20. Foul odors and smell of dirty laundry with dirty worn linens throughout building 10, 11, 14, 15, 16, 17, 18, 19, and 20. 1 of 5 couches in main living torn and/or worn areas. Floor in living near a/c unit. broken dressers and damaged and	{A 152}		

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{A 152}	Continued From page 11 deteriorating baseboards Dirty vents throughout building, observed with dirt and trash debris observed with no closet door-just an exposed rod storage with damaged wall connection. back lid missing to missing ceiling vent broken dresser drawers broken dresser Building #2 observed with foul odors with dirty floors,trash debris and dirty/worn linens, and stained floors in 2, 3, & 6, Building 3 Porch light fixture broken 1,2,3,4,5, 9 with unfinished plaster repairs on walls. Dirty/worn linens, floors and vents, peeling ceilings. from observed with damaged vanity and mirror. upstairs 94, 83, 81, 82, 84, with damaged flooring, foul odors, chipped paint, Dirty tiles on with foul odors Class III	{A 152}		

RICK SCOTT
GOVERNOR

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

. 2013

Administrator
Plymouth Home For Adults
3225 Plymouth Street
Jacksonville, FL 32205

Dear Administrator:

This letter reports the findings of a revisit survey conducted on . 2013 by a representative of this office. Enclosed is the provider's copy of the Statement of Deficiencies and Plan of Correction (State Form 3020), which references the uncorrected deficiencies, identified during the revisit.

All deficiencies shall be corrected no later than . 2013.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call this office at (904) 798-4201.

Sincerely,

Keisha Woods, MPH
Health Facility Evaluator Supervisor
Division of Health Quality Assurance

JL/KW/sm
Enclosure

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