

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11965678	(X3) DATE SURVEY COMPLETED 07/31/2014
NAME OF PROVIDER OR SUPPLIER Savannah Court Of Lakeland	STREET ADDRESS, CITY, STATE, ZIP CODE 6550 N Scorum Loop Road Lakeland, FL 33809	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0152 - 58a-5.023(3) Fac - Physical Plant - Safe Living Environ/other

Specific Tag Findings:

0000-Initial Comments

Assisted Living Facility

A complaint survey, CCR# 2014005241, was conducted on 7/29/14.

The Savannah Court of Lakeland assisted living facility had deficiencies at the time of the visit.

0152-Physical Plant - Safe Living Environ/Other 58A-5.023(3) FAC

Based on observations, interviews and a review of facility maintenance logs, the facility failed to ensure that all emergency lights in the facility were in working order. (3 of 5 lights in the 200 hall of the facility and 1 light in the 100 hall). In case of loss of power there would be no lighting in the hallways.

A tour of the facility was conducted with the Resident Relations Coordinator at approximately 11:45 a.m on 7/29/14. All emergency lights in the hallways were checked to ensure operation. The emergency lights in the 200 hall near 208 and 215 and between the public entrance and the dining room did not light when the test buttons were pushed.

In addition 1 light did not function near Suite 101.

Interview with the Resident Relations Coordinator revealed that the facility does not currently have a Maintenance Director. The Maintenance Director from a sister facility visits occasionally to take care of work orders posted on the maintenance log. A review of the maintenance log from 7/1/14 and 7/29/14 of 2014 did not contain a request for emergency light operations.

Interview with the Maintenance Director at the facility's sister facility was conducted on 7/29/14 at 11:30 A.M. He stated that he was not aware of emergency lights not operating in the facility and had no reason to check them during his weekly visits to the facility. He also confirmed that there was no entry made on the Maintenance log regarding non functioning emergency lights.

Class III



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

January 1, 2014

Administrator
Savannah Court of Lakeland
6550 N Scorum Loop Road
Lakeland, FL 33809

RE: CCR# 2014005241

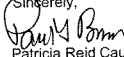
Dear Administrator:

This letter reports the findings of a complaint survey that was conducted on January 1, 2014, by a representative(s) of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiency that was identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct this deficiency within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review to verify that the necessary corrections are in place to correct the deficiency identified on your survey.

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(s). Should you have any questions please call **Paul Brown**, HFES, at 727-552-2000.

Sincerely,

for Patricia Reid Cauffman
Field Office Manager

PRC/kpr

Enclosure: State (5000-3547) Form

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