

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11910716	(X3) DATE SURVEY COMPLETED
NAME OF PROVIDER OR SUPPLIER North Lake Retirement Home	STREET ADDRESS, CITY, STATE, ZIP CODE 1222 North 16th Avenue Hollywood, FL 33020	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:

0055-Medication - Storage And Disposal-08/18/2014
0078-Staffing Standards - Staff-08:
0084-Training - Assis Self-Admin Meds & Med Mgmt-08
0093-Food Service - Dietary Standards-

Revisit Repeat Tags:

0000-Initial Comments-
0152-Physical Plant - Safe Living Environ/other-58a-5.023(3) Fac

Specific Tag Findings:

0000-Initial Comments

An unannounced follow-up to the licensure survey was conducted on North Lake Retirement Home had an uncorrected deficiency found at the time of the visit.

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

Based on observation and interviews, the facility failed to provide a safe living environment free of hazards.

The Findings Include:

During the facility tour on beginning at 9:25 AM, the following environmental/safety issues were observed and photos were taken:

1. Building adjacent to the facility housing residents (one #19 used for the building)
 - a. Residents the left of entryway had a curtain but no door. Four residents reside in this In an interview conducted on at 10:15 AM, the supervisor stated it was the residents' choice to have a curtain and not a doorway. In an interview conducted on at approximately 9:50, Resident #30 stated he would like a door as things have gone missing from the
 - b. Resident the right of entryway had no door. In an interview conducted on at 10:15

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AM, the supervisor stated he did not know that this was an issue. This writer stated it was listed in the statement of deficiencies regarding survey conducted on

2. Building Exterior

a. Soffits outside #5, #6, and #7 were cracked with wood and buckling. A tarp with bricks holding it down was observed on the roof. In an interview conducted on at 10:30 AM, the Owner stated that the roof should be fixed in approximately a month. The Owner stated he was waiting on funds to pay for the repairs.

Resident #31 was sitting outside. She asked this writer, "When is that (pointed to the roof) going to get fixed? It's unsightly." Numerous residents and staff members observed throughout the survey walking and sitting underneath this area.

b. Dilapidated wooden shack outside Building #19 with wood in numerous places. Broken clay pots and tiles stored inside shack. Rotted wood hanging down from the shack roof. In an interview conducted on at 10:30 AM, the Owner stated he uses the shack to store the lawn mower. The lawn mower was observed outside of the shack on the grass. The Owner stated there has never been any accidents related to the shack for 25 years. This shack is located on the grounds of the facility, which is accessible to resident.

Residents from the facility can get access from a gate with a latch and no lock on the east side of the building facing the parking lot. Residents in the adjacent building #19 can also access the shack. During the tour of facility numerous residents were observed.

c. Old mattresses and a bedframe stored outside Building #19. The Maintenance Director stated on at 10:20 PM, that he would get rid of the bedframe today and that the old mattresses are picked up once a month.

d. Old air conditioning units, chair, ladders, a wheelchair, wood fencing, a grocery cart, and yellow plastic bins observed outside Resident. The gate leading from resident to this area observed to have a latch that could be opened allowing residents access. In an interview conducted on at approximately 10:20 PM, the Maintenance Director stated the yellow bins contained parts he uses to fix items and the wheelchair was broken. He stated the items get picked up once a month for discarding.

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In an interview conducted on . . . at 10:30 AM, the Owner stated that he told the Maintenance Director to put a lock on the gate versus a latch. After surveyor intervention, the latch was replaced with a lock.

e. Two storage sheds observed open that contained paint, cleaning supplies, tools, and various chemicals. Prior to surveyor intervention, a latch was on the gate which would allow access to this area.

Class III

This is an uncorrected deficiency.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
North Lake Retirement Home
1222 North 16th Avenue
Hollywood, FL 33020

RE: Relicensure Survey Revisit

Dear Administrator:

This letter reports the findings of a state relicensure survey revisit that was conducted on
19, 2014 by a representative of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the previously cited deficiencies that were found corrected and the uncorrected deficiency that was identified on the day of the revisit. 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 after 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 representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,


 Arlene Mayo-Davis
Field Office Manager/par

AMD
Enclosure

