STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967568	09/27/2016
NAME OF PROVIDER OR SUPPLIER **ALF AT OCEAN BREEZE GARDENS**	STREET ADDRESS, CITY, STATE, ZIP CODE **500 LEE AVE** **SATELLITE BEACH, FL 32937**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 Initial Comments

A monitoring visit to accompany the Fire Inspectors on their inspection was conducted on / at ALF at Ocean Breeze Gardens Assisted Living Facility License #11569. ALF at Ocean Breeze Assisted Living Facility had deficiencies at the time of the visit.

0008 Admissions - Health Assessment

Based on record review and interview, the facility did not obtain an accurate Resident Health Assessment form (1823) for 1 of 1 sampled residents (#1).

Findings:

Observations on / at 10:45 AM, revealed resident #1's cluttered and there were pill bottles observed in her the table and in bags.

Record review for resident #1 revealed an 1823 dated , the health care provider noted Resident #1 required assistance with her medication. The Health care provider did not note the type of assistance she required, that section was left blank.
On at 11:45 AM, the administrator said the 1823 was not accurate. He said Resident#1 could take her own medications and did not require any assistance.
Class

0081 Training - Staff In-Service

Based on the review of the fire safety report, observation of fire evacuation drills and interviews, it was determined that there were problems with emergency and evacuation procedures of the Assisted Living Facility which could be reduced through additional training or education than already required for the staff of the facility.

Findings:

On at 10 AM, the agency accompanied the Local Fire Inspectors to observe a fire drills; the following was observed

The fire inspector informed the administrator that there would be a fire drill in two of the houses and they would sound the alarm in order to time the evacuations.
Building 520-the alarm was sounded, there was one staff present. She continued to wash dishes, she

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had to be told by the administrator that she needed to evacuate the 7 residents present. The administrator evacuated one of the residents that was in a wheel chair, the staff went to the of the residents that could evacuate and assisted them with the evacuation.
There was one resident who could ambulate herself in her wheelchair stuck in the doorway backwards, she could not get out. She continues to call the staff for help, the staff was outside with the other residents, the administrator who was outside was observed telling the staff to go get the resident out of the door. The fire inspector said the timing of this drill was 3 minutes 33 seconds and he said it was slow.

Building 535- the fire Marshall sounded the alarm. There was a private caregiver for one of the residents present, there was a lady present doing activities, a staff from the other building arrived because she was instructed to come and assist, the staff that was assigned to that building was present.

The private care giver removed her resident, the residents that could walk were told to leave, the one staff was running around , there was a resident who was sitting in the recliner that no one notice, there were two residents in the that no one noticed. The activity person had to tell the staff there was a resident still in bed. That resident did not have on clothes the staff had to get her dressed. The other resident that was in the told to come out. She came out with a rolling walker. The caregiver for that building was outside and must have noticed all residents were not out and she came back in looking around she observed the one resident who was sleeping in the recliner chair. The staff found the resident, the Fire commander stopped the staff from removing her because they were already over the required time. This time was 4 minutes 20 seconds, the fire inspector said this evacuation time was considered slow.

During an interview with the fire department commander on / at 10:30 AM, he said he was concerned with the response time of the evacuation and having one staff in each building. He said there were 4 individuals assisting in building 535 and it took over 4 minutes to evacuate.

On / at 10:50 AM, the Administrator said the staff were to call the other buildings to get staff to come and help them if there was a fire, he said this was taught during their emergency training and was in the facility's evacuation plan and training.
The staff at no time called the other staff for assistance.
A review of the facility's evacuation policy and procedure revealed there was no documentation to confirm that staff were told to call the other buildings for assistance.

On / at 11 AM Staff A said if there was a fire in the other buildings she would remain with her residents in the building where she is working and be alert of what is going on. She would not leave the residents to go help the other building, that was what she was trained to do.

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/ at 11:15 AM, Staff B said if there was a fire in the other buildings she would remain in her building in case she had to evacuate the residents in her building, she would not go assist another building.

The staff interviewed were not familiar with the facility's emergency and evacuation procedure and did not know how to timely evacuate the residents.
Review of the staff training certificate revealed
Staff A had the emergency training on
Staff B had the emergency training on //
Staff C had the emergency training on /
Review of the Fire Inspection report dated / revealed noted #3-Miscellaneous Violation Status: Fail.
Note: Fire Alarm system showing a trouble on the annunciation panel. Failed the minimal evacuation time for building 520 and building 535.

On at 1 PM the administrator confirmed the findings and said he would provide training to all employees and revise his emergency evacuation plan.

Class III

0152 Phvsical Plant - Safe Living Environ/Other

Based on the review of the fire safety reports, observations and interviews, the facility did not provide a safe living environment to ensure a safe evacuation of the residents of the facility in the event of an emergency by not having adequate and appropriate fire/life safety measures in place and did not maintain 1 of 1 sampled residents (#1) free of clutter.

Findings:

On at 10 AM, the agency accompanied the Local Fire Inspectors to observe a fire drill the following was observed:
The fire inspector informed the administrator that there would be a fire drill in two of the houses and they would sound the alarm in order to time the evacuations.
Building 520-the alarm was sounded, there was one staff present. She continued to wash dishes, she had to be told by the owner that she needed to evacuate the 7 residents present. The administrator evacuated one of the residents that was in a wheel chair, the staff went to the of the residents that could evacuate and assisted them with the evacuation.

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There was one resident who could ambulate herself in her wheelchair, who was stuck in the doorway backwards, she could not get out. She continues to call the staff for help, the staff was outside with the other residents, the administrator who was outside was observed telling the staff to go get the resident out of the door. The fire inspector said the timing of this drill was 3 minutes 33 seconds and he said it was slow.

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The private care giver removed her resident, the residents that could walk were told to leave, the one staff was running around , there was a resident who was sitting in the recliner that no one notice, there were two residents in the that no one noticed. The activity person had to tell the staff there was a resident still in bed. That resident did not have on clothes the staff had to get her dressed. The other resident that was in the told to come out. She came out with a rolling walker. The caregiver for that building was outside and must have noticed all residents were not out and she came back in looking around she observed the one resident who was sleeping in the recliner chair. The staff found the resident, the Fire commander stopped the staff from removing her because they were already over the required time. This time was 4 minutes 3 seconds, the fire inspection said this evacuation time was considered slow.

During an interview with the fire department commander on at 10:30 AM, he said he was concerned with the response time of the evacuation and having one staff in each building. He said there were 4 individuals assisting in building 535 and it took over 4 minutes to evacuate.

On at 10:45AM, the Administrator said the staff were to call the other buildings to get staff to come and help them if there was a fire, he said this was taught during their emergency training and was in the facility's evacuation plan and training.
The staff at no time called the other staff for assistance.
A review of the facility's evacuation policy and procedure revealed there was no documentation to confirm that staff were told to call the other buildings for assistance.

On / at 11 AM Staff A said if there was a fire in the other buildings she would remain with her residents in the building where she is working and be alert of what is going on. She would not leave the residents to go help the other building, that was what she was trained to do.

/ at 11:15 AM, Staff B said if there was a fire in the other buildings she would remain in her building in case she had to evacuate the residents in her building, she would not go assist another building.

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Further observations of the Resident #1 revealed there was clutter throughout the , Bottles of medication, there were stacks of papers and bags, further observations revealed there was clutter next to the window.

On at 12:15 PM, the fire inspection said the clutter in the resident's a fire hazard, he said if the fire department staff needed to use the window to remove the resident in the event of a fire it would be hard to do so with all of the clutter.
Review of the unsatisfactory fire inspection report dated revealed it noted:
#1-Exits: Remove obstructions from exits, aisles, corridors and stairways
Status: Fail
Notes: Vehicles blocking front exit during fire drill
#2-Fire extinguishers
Portable fire extinguisher is due for annual maintenance
Status: Fail
Notes: Fire extinguishers are out of date
#3-Miscellaneous Violation
Status: Fail
Note: Fire Alarm system showing a trouble on the annunciation panel. Failed the minimal evacuation time for building 2 and building 4.
#4-Housekeeping
Arrange storage in orderly manner to provide for exiting and fire department access
Good housekeeping makes and area safer for occupants and contributes less fuel to fire. When storage is orderly, fire fighters can get fast access to minimize fire damage.
Status: Fail
Notes: Remove storage from front of the second means of egress located in (name of resident #1 noted) in disarray. Provide proper storage.

On / at 1 PM, the administrator confirmed the findings.

Class III

SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Alf At Ocean Breeze Gardens
500 Lee Ave
Satellite Beach, FL 32937

RE: Monitoring with Fire Inspectors

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2016 by representative(s) of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. **Please attach a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents to the Field Office no later than 13, 2016.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiencies identified on your survey, which may include a desk review or onsite revisit.

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 Lorraine Henry at -2502.

Sincerely,

Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure
XG90

Orlando Field Office
400 W. Robinson St., Suite S-309
Orlando, FL 32801
Phone:(407) 420-2502; Fax:(407) 245-0998
AHCA.MyFlorida.com