STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965603	11/01/2017
NAME OF PROVIDER OR SUPPLIER **BRIDGE ASSISTED LIV AT LIFE CARE CENTER OF ORLANDO**	STREET ADDRESS, CITY, STATE, ZIP CODE **3201 ROUSE ROAD** **ORLANDO, FL 32817**	

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

0000 - Initial Comments

A Complaint investigation #2017012039 was conducted on . The Bridge Assisted Living at Life Care Center of Orlando, license #9958, had deficiencies related to this complaint at the time of the visit.

0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28(1-2) FS

Based on observation, maintenance record review and interview, the facility failed to honor a resident's right to a clean, safe and decent living environment by failing to repair a leaking window in her apartment (#2).

Findings:

During an interview with resident #2 on at 12:10 PM, in the dining , she stated her a window that had been leaking for a few months. She further stated she asked for it to be fixed, but it still leaked when there was with hard, driving rain. She said during the recent hurricane (-) she had to sleep on a narrow and uncomfortable sofa in the hallway because her daughter and the staff did not think it would be safe in her . The next morning there was some water in her , but not a lot. She stated the staff did bring in fans to dry the wet carpet, but no one came in to fix the window. She said no one had told her anything about when it would be fixed.

Observation of the resident's window in revealed she had a bay window. The resident said water came in if it rained hard and there was wind. She thought it was not sealed properly. There was no water, dampness or odor present on the date of the investigation.

Review of the maintenance log from through 2017 revealed an entry dated requesting repair of a leaking bay window in . The entry was marked open. There were no notes about any work done or contact made with the resident.

In an interview with the administrator on at 1:25 PM, she stated the former maintenance director was no longer working there. She did not have an explanation as to why the repair was not done, but she stated there was already a repair scheduled for 's window for Friday from an outside company.

Class III

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

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965603	11/01/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRIDGE ASSISTED LIV AT LIFE CARE CENTER OF ORLANDO	**3201 ROUSE ROAD ORLANDO, FL 32817**

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

Based on observation, maintenance record review and interview, the facility failed to maintain a clean, safe and decent living environment by failing to repair leaking windows in resident apartments.

Findings:

During an interview with resident #2 on at 12:10 PM, in the dining , she stated her a window that has been leaking for a few months. She said she asked for it to be fixed, but it still leaks with hard, driving rain. She said during the recent hurricane (-) she had to sleep on a narrow and uncomfortable sofa in the hallway because her daughter and the staff did not think it would be safe in her . The next morning there was some water in her , but not a lot. She stated the staff did bring in fans to dry the wet carpet but no one came in to fix the window. She said no one had told her anything about when it would be fixed.

In an interview with the administrator on at 1:05PM, she stated a repair was scheduled for the bay windows in 214 & 314 for Friday from an outside company.

Observation of the resident's window in revealed she had a bay window. The resident said water came in if it rained hard and there was wind. She thought it was not sealed properly. Review of the census revealed no one was residing in at the time of the investigation.

Review of the maintenance logs from through 2017 revealed an entry dated requesting repair of a leaking bay window in . The entry was marked open. There were no notes about any work done or contact made with the resident.

In an interview with the administrator on at 1:25PM, she stated the former maintenance director was no longer working there. She did not have an explanation as to why the repair was not done prior to her arrival at the facility this week.

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on facility record review and interview the facility failed to ensure an annual fire inspection was conducted by the local fire department and a copy of the facility's fie plan was readily available to all staff.

Findings:

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965603	**11/01/2017**
NAME OF PROVIDER OR SUPPLIER **BRIDGE ASSISTED LIV AT LIFE CARE CENTER OF ORLANDO**	STREET ADDRESS, CITY, STATE, ZIP CODE **3201 ROUSE ROAD** **ORLANDO, FL 32817**	

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

During the entrance conference with the administrator, a copy of the facility fire inspection and fire plan was requested for review. The most recent fire inspection was dated . . . . . The fire plan was dated but was not reviewed in 2017 by the fire department.

In an interview with the administrator on at 1:30 PM, she confirmed the findings. She said she was new to the facility that week and could not explain why the fire inspection was not done or the fire plan was not reviewed.

Class III