STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910275	**12/21/2017**
NAME OF PROVIDER OR SUPPLIER **GOOD SAMARITAN RETIREMENT HM**	STREET ADDRESS, CITY, STATE, ZIP CODE **507 S.E. 1ST AVENUE** **WILLISTON, FL 32696**	

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

0000 - Initial Comments

On , 2017, a monitoring survey was conducted at The Good Samaritan Retirement Home (License #25) during the execution of an emergency suspension order. During the monitoring survey deficient practice was identified.

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

Based on interview, observation, and record review, the facility failed to provide a safe living environment free from bedbugs for 23 of 23 residents in the facility.

Findings:

On at approximately 1:00 PM staff from Homewood Lodge Assisted Living Facility (ALF), who was removing a resident from the facility, stated they found bedbugs in the resident's .

On at approximately 1:30 PM it was observed that resident had what appeared to be a large amount of bedbug residue on the corners of the bed (see photo evidence).

On a record review was conducted on Department of Health (DOH) Inspection Report for the facility from between 10:00 AM and 11:15 AM. The report stated that the DOH inspectors found bedbug evidence in 4 of 7 resident that they inspected and they suspect the infestation to be facility wide.

Class III