STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11942845	**02/07/2018**
NAME OF PROVIDER OR SUPPLIER **SUNRISE ADULT CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **4102 COOLEY COURT** **LAKE WORTH, FL 33461**	

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

0000 - Initial Comments

An unannounced complaint survey, CCR# 2018001868, was conducted on [redacted] at Sunrise Adult Care, License #8286. The facility had deficiencies at the time of the visit.

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

Based on observation, interview, and record review, the facility failed to provide a safe, clean living environment, and ensure all existing architectural, structural systems, and appurtenances are maintained in good working order for 4 of 4 sampled residents.

The findings included:

During the observation tour of the facility between the times of 8:30 AM - 9:00 AM, with the Administrator and the Staff A revealed the following:
1. Upon entrance to the facility, the doorbell was observed hanging and [redacted] from the outside walls of the facility.

Observations of the kitchen revealed no cabinet doors on any of the cabinets. Further review of the kitchen upon opening the drawers under the counter top revealed that the residents silverware was jumbled together with other miscellaneous hard wear items, such as paint brushes, nails, and screws and other various types of metal that had rust on them.

Observations of the bottom cabinets that stored kitchen appliances also revealed pieces of wood stored underneath.

Observations of one of two of the kitchen's food pantries that stored the residents' snacks and canned foods revealed various packs of opened and unopened batteries, gas cards, and used gardening gloves.

Observations of the second kitchen pantry revealed used napkins balled together inside of metal baking pans, and various cans stored on the top shelves without expiration dates. Further observations revealed dust and dirt across the top of the cans when touched.

Observations of the shelves that the cans were sitting on top of revealed bending of the wood from the weight of the cans. The shelves, immediately under the bending shelf, were wrapped in [redacted] foil. Underneath the [redacted] foil, the wood was observed to be in disrepair and chipped in various places.

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11942845	02/07/2018
NAME OF PROVIDER OR SUPPLIER **SUNRISE ADULT CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **4102 COOLEY COURT** **LAKE WORTH, FL 33461**	

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

During an interview with the Staff A on at 8:47 AM, it was stated that the facility is replacing the baseboards and the cabinets and that is why the cans of food have dust on them. Staff A further stated that residents are not allowed in the kitchen, and if they need anything from the kitchen than she will bring it to them. Staff A had no response to the reasons of why hardware items were mixed in with the residents eating utensils, and in the food pantries.

2. Observation of the patio in which the residents sit in the back of the facility revealed the following: Storage of clothes in garbage bags and shoes piled up in the corner.

The netted material that encloses the patio to prevent insects from entering was observed torn off on all sides of the patio.

Observations of the patio chairs for the residents revealed dirt in the seat of each chair. Six chairs total was observed.

A black electrical wire attached to the back of the house was observed hanging low enough for residents to touch when walking by.

During an interview with Staff A at 8:50 AM on , it was stated that the clothes that's in the corner is her clothes and that she is piling them up to take to a 'confidential place'.

During an interview at 1:52 PM on with the Administrator, it was confirmed that he has been working on the kitchen for about a week and he is replacing the baseboards for the cabinets. The administrator had no response to the hardware items being mixed in with the residents food items or to the concerns found on the patio.

Class III

0181 - Emergency Plan Approval - 58A-5.026(2) FAC

Based on record review and interview, the facility failed to have their Comprehensive Emergency Management Plan (CEMP) submitted to the local agency for review and approval on an annual basis.

The findings included:

Review of the facility's Comprehensive Emergency Management Plan (CEMP) revealed that it was dated for . Review of the approval letter from the local emergency management agency also had a

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11942845	**02/07/2018**
NAME OF PROVIDER OR SUPPLIER **SUNRISE ADULT CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **4102 COOLEY COURT** **LAKE WORTH, FL 33461**	

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

dated for of 2016. Review of the facility's CEMP revealed no evidence the facility did not submit the CEMP for approval for the 2017-2018 year.

During an interview with the administrator on at 2:07 PM, it was stated that approval letter from 2016 is the only one that he has and that the local emergency management agency told him that it only had to be re-submitted if there were changes. The administrator further stated that he was unaware that it had to be renewed every year.

Class III