STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11942918	C 03/21/2018
NAME OF PROVIDER OR SUPPLIER **EASTSIDE CARE, INC.**	STREET ADDRESS, CITY, STATE, ZIP CODE **152 S EAST DEFENDER DRIVE** **LAKE CITY, FL 32055**	

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

0000 - Initial Comments

On . . . . a complaint survey (CCR#2018001267) was conducted at Eastside Care Inc Assisted Living Facility in Lake City, Florida (License #5425). Deficient practice was identified during the survey process.

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

Based on observation, interview, and record review the facility failed to treat residents with consideration and respect specific to canine presence in the facility for 43 of 43 resident.

Findings:

On . at 9:18 AM, Staff B stated he has no , policy or documentation showing residents are okay with the dog wandering inside the facility, he stated he may have shot records on file for Buddy.

On . at 9:26 AM, Tour of the dining a big black dog roaming around the dining tables and lounge area in front of the television; dog observed to lay down near the left side on of the front doorway leading outside. (Photographic Evidence)

On . at 9:55 AM, Interview conducted with Staff A revealed Buddy wanders about the entire facility and he walks around in the kitchen and dining . . . . well. She stated at times Buddy would take a seat on the couch and watch television with the residents.

On . at 10:10 AM, Resident #1 stated that the dog walks around in the kitchen and the dining . . . . they are eating, but dogs should not be allowed to do that and I don't want him in there while I am eating my food.

On . at 10:20 AM, Resident #2 stated the dog is always in the kitchen and dining everyday but as long as the dog does not come around his food, he is okay. He stated, "I don't know whose dog it is but they need to come get him, I'm tired of seeing him in the kitchen around the food". Resident stated he wants to go live with his family because "they don't care about me here".

On . at 10:33 AM, Resident #4 stated; Buddy is in the kitchen all the time because he is hungry.

On . . . . at 10:38 AM, Resident #5 stated the dog does not bother her but he should not be in the kitchen around food, "I don't want to eat no dog hair". Resident stated she gets along with everyone and has no other problems.

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On at 10:45 AM, Resident #6 stated he is not sure whom the dog belongs to but he should not be in the dining he eats his food.

On at 11:10 AM, the Facility Manager confirmed the canine Buddy had not been and no other shot records were on file regarding the dog at the facility. The Manager confirmed the dog had no current /shots.

Class III

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

Based on observation and interview the facility failed to maintain a clean, safe, and decent living environment for 43 of 43 resident of the facility.

Findings:

On at 9:26 AM, Facility tour conducted revealed a pile the sidewalk leading to resident to be cracked and uneven. The telephone in the dining residents use observed to not have a dial tone, not operable.

On at 10:20 AM, revealed: joining toilet for and 4 will not flush, broken towel bar in , with brown colored substance on it, has a brown substance on it, stained, and sheets on bed has a brown stain on it. (Photographic Evidence)

On at 10:38 AM, revealed stained floors between both beds, stained sheets/pillow cases, stained/dirty floors, joining 20 and 19 has stains on walls, stains on shower base, dirty floors, hole in wall next to shower, has brown/rust colored substance on it, has peeling paint and brown/rust colored substance on it, and wall located to the right side of the door has black marks on it. (Photographic Evidence)

On at 10:57 AM, Resident #8 revealed missing towel bar in , stained , and with grayish/brown substance on it. to be cluttered and unorganized. (Photographic Evidence)

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On at 11:04 AM, Observation conducted in revealed dirty floors, no space to hang clothing, clothing around floor, broken florescent light fixture/cover, brown substance on back of entry door, and rotted wood at bottom of door facing. (Photographic Evidence)

On at 11:10 AM, the Facility Manager stated resident have days to bring their laundry up to do it; laundry is done by wings. When asked for laundry schedule that was provided to the residents to inform them of their scheduled laundry days; the Manager was not able to provide one. The Facility Manager confirmed the resident's telephone was not working and stated the resident are allowed to use the cordless telephone in the Assistant Manager's office.

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