STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965225	**08/07/2018**
NAME OF PROVIDER OR SUPPLIER **GOLDEN POND COMMUNITIES**	STREET ADDRESS, CITY, STATE, ZIP CODE **400 LAKEVIEW ROAD** **WINTER GARDEN, FL 34787**	

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

0000 - Initial Comments

A Complaint Investigation #2018008090 was conducted on . . . . . and . . . . . in conjunction to Complaint Investigation #2018006840 and #2018006858. Golden Pond Communities Assisted Living with Limited Nursing Services (LNS), License #9626 had deficiencies 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 and interview, the facility failed to honor residents' rights for a safe, clean and decent living environment and did not clean the carpets in the resident living areas.

Findings:

Observations throughout the 5 buildings that house residents found the carpets in the common spaces (hallways, sitting areas, and dining areas) to be very dirty and soiled.

On at 11:30 AM, resident #8 stated, "the carpets have been filthy lately because they got rid of the husband/wife who were cleaning them." She said the carpets were always nicely cleaned before they lost them. She stated she was told it was because the facility was not paying them anymore, and then they stopped coming.

On at 4:15 PM, the administrator stated they are replacing the carpeting in all the public spaces very soon. She did not have a date. She also said they stopped attempting to clean the carpets because it did not seem to be helping any more.

Class III

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

Based on observation and interview, the facility failed to have documentation of the facility's Comprehensive Emergency Management Plan (CEMP) approval letter as required annually by the local emergency management agency.

Findings:

The CEMP was requested, there was no documentation if the CEMP was approved by Orange County Emergency Management office on an annual basis.

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SUMMARY STATEMENT OF DEFICIENCIES
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On ..... at 2 PM, an interview with the Administrator who confirmed the finding.

Class III

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