STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964702	09/18/2018
NAME OF PROVIDER OR SUPPLIER **SAVANNAH COURT OF ORANGE CITY**	STREET ADDRESS, CITY, STATE, ZIP CODE **202 STRAWBERRY OAKS DRIVE ORANGE CITY, FL 32763**	

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

0000 - Initial Comments

An unannounced complaint survey (CCR# 2018010627) was conducted on at Savannah Court of Orange City (License #9243). Deficiencies were identified during the visit.

0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC

Based on record review and staff interview the facility failed to maintain written records of significant changes, illnesses, and discharge information for 2 of 3 sampled residents (Resident #1 and #3).

The findings include:

1. Record review for Resident #1 revealed a female admitted on with diagnoses including muscle , difficulty walking, , failure, lack of coordination, communication , major .

Review of the Health Assessment dated revealed she was alert and oriented x 2, and required assistance with ambulation, bathing, dressing, self care , toileting and transfers.

On hospice services were ordered.

Review of the notes maintained by the hospice registered nurse (RN) revealed the following: on , a new order was obtained for eye drops. On Resident #1's daughter requested appetite stimulant. On , she was found with rashes to back, flat, moist very reddened areas under the , and erthyema to . During the visit Resident #1 had episode of large amount brown .

Review of the facility's documentation showed there were no nursing progress notes regarding change of conditions, new treatment and medication orders, or notification to the family about the changes.

2. Record review for Resident #3 revealed a female admitted on with diagnosis included: , , and history of . The admission/discharge log indicated she was discharged, however the log did not contain date or reason for discharge. There were no nursing progress notes at the time of the survey which indicated when she left, and the situation that led to Resident #3's discharge.

During an interview with the administrator on at 4:30pm, confirmed there were notes and no

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documentation regarding discharge.

Class III

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

Based on observations, staff and resident interviews the facility failed to provide a safe and clean living environment for all 29 residents of the facility.

The findings include:

During a tour of the facility on at 9:30am the following environmental issues were observed: carpeting in all common area hallways had numerous stains and no evidence that carpets had been vacuumed(much loose dirt and debris). Large stained areas were observed outside 21, 22, 24, 25, 26, 37, beauty shop and in front of the resident mailboxes. An observation of carpeting in resident found the carpeting was very worn, heavily stained, dirty, loose debris and no evidence that the carpeting was cleaned or vacuumed on a regular routine. The sinks and showers had build up of film, tile grout had dark heavy stains. The were not cleaned and some were sticky. The had heavy layers of dust on the walls, furniture and windowsills.

During an interview with Resident #4 on at 9:40am, she was asked who did the housekeeping in the facility. She said there had not been a housekeeper in months. She said they only recently got a maintenance man after about 4 months. She said she usually tries to keep her using lots of bleach wipes. She asks staff to bring the vacuum down to her so she can vacuum. The facility does her laundry, but none of the dryers work. When asked if she had voiced her concerns to the administrator, she said she told the former administrator numerous times but nothing was done. They have a new administrator who just started two weeks ago.

In an interview with Resident #5 at 10:30am on , she was asked how often her cleaned, she said she didn't know. She said her daughter in law comes by and changes her bed linen and cleans up. She asked if anyone vacuumed her carpets or cleaned the , she said she has not seen anyone come in and clean.

At 5:50pm on , three residents (Res # 4, #6, and #7) asked to speak with the surveyor privately outside on the patio. They stated they were very concerned regarding the condition of the facility and lack of response to their concerns. They stated they have resident council meeting monthly and all the

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SUMMARY STATEMENT OF DEFICIENCIES
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residents that can speak for themselves attend and they explained concerns that were brought up. There has been no housekeeper for 5 months and the facility is dirty, dusty, carpets in the halls and resident are dirty, very stained and worn out. They explained the don't ever get cleaned and now have mildew. The residents have been told many times they are in processing of hiring someone. They expressed concerns that even if the facility hired someone, the amount of work needed would be too much for just one housekeeper. There was also concern noted that the outside lights on the patio do not work and it got very dark when went outside at night to smoke.

An interview was conducted with the adminstrator at 6:20pm on and the resident concerns were discussed. She was asked why there was not a working dryer, she said they just put in requisition for new one. She said they have one working dryer but it takes a long time to dry anything. She said she was aware of housekeeping issues and that they did not have a maintenance man until recently. When asked what provisions were being made to ensure clealiness of the facility at this time, she said they were in process of hiring someone.

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	LC8655	**09/21/2018**
NAME OF PROVIDER OR SUPPLIER **CARESPOT EXPRESS HEALTCARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **2095 US HIGHWAY 1 SOUTH** **SAINT , FL 32086**	

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

0000 - Initial Comments

A re-licensure survey was conducted on . . . . . Carespot Express Healthcare had no deficiencies at the time of the survey.