STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968435	**03/06/2019**
NAME OF PROVIDER OR SUPPLIER **SOMERSET COMMUNITY**	STREET ADDRESS, CITY, STATE, ZIP CODE **34731 CHANCEY RD** **ZEPHYRHILLS, FL 33541**	

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

0000 - Initial Comments

Assisted Living Facility

A complaint investigation (CCR 2019003058) was conducted at Somerset Community on . . . . . Somerset Community had deficiencies at the time of the investigation.

(License #12425)

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 living environment, free of hazards, with all electrical systems maintained in good working order. Specifically, the facility failed to ensure that they hired an electrical contractor (Electrician) that was licensed with the local county, who obtained a required permit to perform electrical work, and authorized substandard electrical work that put the facility's five residents (Residents #1, 2, 3, 4, and 5) in immediate danger.

Findings included:

A review of records provided by the local emergency management agency (Emergency Management) indicated that the local county fire and rescue official (Fire and Rescue) was present at the facility on to conduct an inspection. Fire and Rescue discovered that the electrical panel had experienced arcing and contacted the local electrical power company. Further review of the above record revealed that the facility began using an emergency generator at 7:00 PM on .

A review of correspondence from the Fire and Rescue dated , revealed that the Electrician had installed a plug to "backfeed" power from an emergency generator (when it was plugged in) to the facility (According to a follow-up e-mail from Fire and Rescue, backfeeding occurs when power has not been . . . . . to a specific location. By isolating the power, it is maintained in a specific location and does not overflow to the electric power company lines or the home's circuits, which would place the safety of residents at risk as well as electric company workers). Fire and Rescue indicated that the work was not done correctly (per local code). Fire and Rescue stated that the electrical work completed caused arcing (electrical discharges) and the facility called the local power company to shut off the electricity so work could be done to repair the electrical panel. Fire and Rescue noted that the local electric company would not turn the power . . . on until a safety inspection was conducted.

In a phone interview conducted at 11:20 AM on . . with an official from the local emergency

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management agency (Official #2), Official #2 stated that thhe facility hired the Electrician to do work on the facility's electrical system in an attempt to gain approval for their emergency environmental control plan (EECP). Official #2 further stated that they received a letter from the facility (on the Electrician's letterhead) on indicating that the Electrician had completed the work.

A tour of the facility was conducted beginning at 2:00 PM on at which time Staff A stated that the facility was operating on generator power. The temperature in the living room (the room entered immediately from the front door) was measured by a hygrometer at 2:02 PM and it read 86 degrees with 45.4% humidity. Resident #1 and Resident #2 were present in the living room at this time.

An interview was conducted with Resident #4 at 2:11 PM on . The resident was asked about the unit next to their bed. The resident stated that they need at night. The resident was asked to turn the electric powered unit on. The resident accessed the switch and stated that it was not working. The temperature in their room at the time was read as 82.1 degrees with 49.8% humidity. According to Weather.com, the high outside temperature in Zephyrhills, FL on was 85 degrees.

A review of Resident #4's record revealed a physician's order from a local hospice dated for as needed for (photographic evidence obtained). The order indicated that Resident #4's primary diagnosis was , ( ).

An interview was conducted with Resident #3 at 3:19 PM on in the living room of the facility and the resident stated that they were hot. Temperature readings taken again at 3:35 PM in the living room showed 86.3 degrees with 41.5% humidity (photographic evidence obtained). Resident #1, Resident #2, and Resident #3 were all present in this area at the time.

An interview was conducted with Fire and Rescue at 2:20 PM on on the facility's premises. Fire and Rescue stated that the generator the facility was utilizing was not able to handle the air conditioning system. Fire and Rescue stated that if the electricity would come on, "it would everything up" as it was "backfeeding" into the facility.

The tour of the interior premises of the facility revealed only a light on in the kitchen, a fan in Resident #4's bedroom, and a light on in an office area. Staff A stated that the stove and refrigerator/freezer were working. An employee of the local health department checked the temperatures in the refrigerator/freezer and was observed informing Staff A that the refrigerator temperatures were above safe standards, there was no hot water, and that the kitchen could not be used to prepare and serve food to the residents due to safety issues. A review of the report from the local health department, dated , revealed that foods were being stored at 45 degrees when the requirement was 41 degrees, and

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presented potential hazards if consumed by the residents (photographic evidence obtained).

An interview was conducted at 2:25 PM on with the local county electrical inspector (Inspector). The Inspector stated that they spoke with the local electric company and the electric company indicated that the wiring in the electrical panel wasn't done correctly. The Inspector stated that the facility never obtained a permit from the county to do this electrical work.

An interview was conducted at 2:30 PM on with the Inspector and the Electrician. The Inspector stated that the Electrician was not licensed/registered with the local county and that this was a violation of local ordinance. The Electrician was asked about obtaining a permit before they performed the electrical work and the Electrician stated that they did not get a permit to do so.

An interview was conducted with the facility's Maintenance Director at 4:07 PM on concerning the status of their emergency environmental control plan (EECP). The Maintenance Director stated that the facility's EECP had not been approved by the local county. An interview conducted at 5:00 PM on with an official from Emergency Management (Official #2) confirmed that the facility did not have an approved EECP.

An interview was conducted with the Manager on at 3:44 PM and the Manager stated that they authorized the Electrician to complete the work.

At 4:21 PM on , Fire and Rescue issued an evacuation of the facility due to the immediate safety issues affecting the residents (photographic evidence obtained). At approximately 4:45 PM on , Resident #5 was observed being taken by ambulance to a receiving facility. At 5:30 PM on , Resident #1, Resident #2, Resident #3, and Resident #4 were evacuated from the facility.

Class I

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on interview, and record review, the facility failed to implement and obtain approval for an emergency environmental control plan (EECP) from the local emergency management agency.

Findings included:

A review of the facility's EECP revealed an attestation statement signed by the Owner on indicating that the facility was in compliance with all requirements (photographic evidence obtained).

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An interview was conducted with the facility's Maintenance Director on . . . . . at 4:07 PM and they were asked whether the facility's EECP was approved. The Maintenance Director stated that the EECP was not approved.

An interview was conducted with an official from the local emergency management agency (Official #2) at 5:00 PM on . Official #2 stated that the plan was submitted but was not approved by local emergency management as it did not meet requirements.

Class III