

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969122	(X3) DATE SURVEY COMPLETED 05/01/2019
NAME OF PROVIDER OR SUPPLIER THE RESIDENCE AT DANIA BEACH	STREET ADDRESS, CITY, STATE, ZIP CODE 150 STIRLING RD DANIA BEACH, FL 33004	

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

0000 - Initial Comments

A licensure monitoring survey was conducted at The Residence at Dania Beach on The facility had deficiencies identified during the visit.

0004 - Licensure - Requirements - 58A-5.016 FAC

Based on interview, record review and observation, the facility failed to notify the agency in writing regarding a change in the use of space regarding the 500 wing of the building. As evidence of the facility failure to notify the Agency regarding fire safety violations identified by the local fire department, resulting in the 500 wing shutting down, thus decreasing the available licensing capacity.

The findings included:

During a tour of the facility on at approximately 10 AM, the 500 wing was noted to be shut down. The doors were noted to be closed (locked) with a sign posted stating "Do Not Enter". There were no residents residing in the wing according to the Administrator.

During an interview conducted on at 2:45 PM with the Administrator, it was revealed the facility was ordered by the local fire department to shut down the 500 wing of the facility located in the rear section of the building due to the facility not having a fire suppression system and fire suppression monitoring system installed. The Administrator stated all of the resident who were previously residing in the 500 unit was reassigned to other rooms throughout the facility (100 thru 400 wing). According to the Administrator, the facility functioning units (rooms located in 100 thru 400 wing) can only accommodate 110 residents as opposed to the approved licensed capacity of 165. It was further stated that the 500 wing had approximately 40 beds that cannot be filled, at this time due to the deficiencies/violations with the local fire department.

Review of the facility census sheet revealed the facility census is currently 96 residents. The Administrator confirmed, at this time, the facility could not accommodate a licensed capacity of 165. She further stated that they had not notified the Agency regarding the decreased capacity of the concerns identified by the local Fire Department.

The Administrator provided the surveyor with a copy of the Stipulation and Agreement for review. Review of this agreement between the local fire department (and Sheriff's Office) and the facility that was signed and dated on revealed the following. The agreement stated residents cannot be admitted into the 500 wing, which has about 40 beds. Record review of the latest Fire Inspection

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/16/2019
FORM APPROVED

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obtained was dated from the local fire department, no violations at this time. Special notes at the bottom stated an annual inspection is predicated on the terms of the executed Stipulation Agreement. Class III 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on record review and interview, the facility failed to submit a Comprehensive Emergency Management Plan (CEMP) to the local emergency management agency for review and approval, as required. The Findings Included: On at approximately 11:59 AM, an interview conducted with the Administrator revealed the facility opened in 2017 and had never received an approved CEMP. The Administrator further stated, at this time, that they submitted the CEMP to the local emergency management division on and currently waiting for an approval. Class III		