Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11967471	A. BUILDING: _____ B. WING _____	07/05/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HYDE PARK ASSISTED LIVING FACILITY	3011 WEST DE LEON STREET TAMPA, FL 33609

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments A complaint investigation (complaint number 2019010238) was conducted at Hyde Park Assisted Living on . Deficiencies were identified at the time of the survey.	A 000		
A 152 SS=D	58A-5.023(3) FAC Physical Plant - Safe Living Environ/Other (3) OTHER REQUIREMENTS. (a) All facilities must: 1. Provide a safe living environment pursuant to Section 429.28(1)(a), F.S.; 2. Be maintained free of hazards; and 3. Ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order. (b) Pursuant to Section 429.27, F.S., residents must be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident bedroom or sleeping area must have at least the following furnishings: 1. A clean, comfortable bed with a mattress no less than 36 inches wide and 72 inches long, with the top surface of the mattress at a comfortable to ensure easy access by the resident; 2. A closet or wardrobe space for hanging clothes; 3. A dresser, or other furniture designed for storage of clothing or personal effects; 4. A table or nightstand, bedside lamp or floor lamp, and waste basket; and 5. A comfortable chair, if requested. (c) The facility must maintain master or duplicate keys to resident bedrooms to be used in the event of an emergency. (d) Residents who use portable bedside commodes must be provided with privacy during	A 152		

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A 152	Continued From page 1 use. (e) Facilities must make available linens and personal laundry services for residents who require such services. Linens provided by a facility must be free of tears, stains and must not be . This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to provide a safe decent living environment and make repairs as required. Findings included: A tour of the facility was conducted on beginning at 9:05am and during the duration of the survey the following observations were made: -wall was damaged with dry wall missing and 2 x 4's exposed. -dirty bed linens and a black substance was on the ceiling tile in the bathroom. -debris piled up in the hallway outside . -smoke alarm was sounding/chipping. -dirty shower curtain with a black substance on it, smoke detector was missing and wires were exposed and a black substance on the ceiling tile and air vent in the bathroom. -blinds were missing and/or broken. - smoke detector was missing and wires were exposed and a black substance was on the ceiling tile in the bathroom. A discarded mattress was out in the alley next to a power panel. Elevator control panel was missing buttons and wires were exposed. (photographic evidence obtained)	A 152		

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A 152	Continued From page 2 During an interview conducted on at 12:45pm, the Assistant Administrator confirmed the need for repairs to the facility. The Assisted Administrator stated "Yes the other agency said repairs need to be done." Class III	A 152		