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
	AL11969122	A. BUILDING: _____ B. WING _____	08/20/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE RESIDENCE AT DANIA BEACH	150 STIRLING RD DANIA BEACH, FL 33004

(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 An unannounced monitoring survey was conducted on [redacted] at The Residence at Dania Beach. The facility had a deficiency identified at the time of the visit.	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 [redacted] to ensure easy access by the resident; 2. A closet or wardrobe space for hanging clothes; 3. A dresser, [redacted] 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 interview, record review and observation during a multiagency spot check the facility failed to ensure that all existing, electrical and structural systems were maintained in good working order, the environment was safe, hazard free and clean. The findings included: a) An interview conducted with the fire inspector revealed the facility has been out of compliance since , . They have numerous uncorrected fire violations related to the fire system for the entire building. The life safety systems have no violations, it's the fire system that have the violations. The 500 unit was shut down because they did not tie that fire alarm system with the main fire alarm system. The entire bldg fire system was done without permit and a permit should have been pulled before starting the job. It was further stated that a Stipulation Agreement was issued to the facility in . . . . . for the facility to bring the facility into compliance and that still has not been met. Record review of the fire inspection dated . . . . . produced by the local fire department on revealed the facility had outstanding violations during the time of the fire inspection.	A 152		

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A 152	Continued From page 2 Record review of the fire inspection dated [redacted] produced by the facility revealed they were given a fire inspection report that stated the facility had no violations at the time of this inspection. The bottom of the inspection form notated that the annual inspection is predicated on the terms of the executed Stipulation Agreement. Record review of the Stipulation Agreement revealed the local Fire Department and The Residence at Dania Beach agreed to the following: 1. That the person signing this stipulation have the authority to enter into this stipulation and bind the respective parties to the terms and conditions contain herein. 2. That fire sprinklered building known as The Residence at Dania Beach is not in compliance with the current applicable Florida Fire Prevention Code and adopted NFPA code regarding the Fire Alarm System. 3. That The Residence at Dania Beach, is granted until [redacted] to comply with NFPA .7.12.7, submission of plans and manufacturer specifications sheets for the existing fire alarm system and associated alterations currently in effect without appropriate reviews, approvals and permit issuance thru the Building Department of Dania Beach. 4. NFPA 1- 13.7.1.1, reference building fire alarm systems that are required by other sections of this, shall be provided and installed in accordance with NFPA 70, NFPA 72 and section 13.7. All work must be in compliance with codes as noted here in. 5. During the term of the stipulated agreement the following items shall be completed by a licensed Fire Alarm Contractor, tested and maintained, as per NFPA .5.8.1 and included	A 152		

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A 152	Continued From page 3 within the plan submission. 6. A permit is required for any work performed in accordance with the Dania Beach Building Department permit requirements; this is for all work performed according to the scope of the permit and must be completed by 7. The failure of The Residence at Dania Beach to comply with the items listed in number5 above or failure to submit plans for the fire alarm system work as listed in number 3, obtain a permit and correct the code violations by will result in in notification to the Agency for Healthcare Administration for failure to comply with the Stipulation and Agreement and the filing of a violation notice with the City's Code Enforcement Magistrate for further enforcement. An interview conducted on at 11:18 AM with the Fire Inspector revealed the facility has not submitted any new documents to the local Fire Department. The Fire Inspector stated the facility still remains out of compliance at this time. It was further stated that there is a glitch in the system and that is the reason why the inspection report printed "NO Violations". The Fire Inspector further stated he has contacted his IT department to fix the glitch but it still remains the same, printing out "No Violations; he stated for this reason he noted at the bottom the aforementioned Stipulation Agreement with the facility. B. Local Code Enforcement found the following violations during the spot check: (1) There is a broken barrel tile near the front entrance of the building. (2) The light fixtures along the front entrance of the building do not have bulbs or covers.	A 152		

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A 152	Continued From page 4 (3) The light fixture in the hallway near . . needs repair. (4) The ceiling has cracks in hallway near . . . (5) The large courtyard grass is overgrown and there are cracks in soffit. (6) The small courtyard grass is overgrown and the canvas roof cover is in disrepair (7) There is expose electric along the hallway near . . . (8) . . . . . A/C vent is in disrepair and the light cover is missing. (9) In the hallway near the laundry room there is an A/C vent with mold like substance around it; the ceiling is missing a hatch and the exterior door to the west side courtyard is in disrepair. (10) Dining room has a hole in the wall near entrance door. (11) The kitchen A/C vent is in disrepair and there is expose wiring hanging from the ceiling (12) The food storage room has a water damage wall. (13) The exit doors near the (FACC office) are not weather tight. (14) The 500 Wing has mold like substance in storage room ceiling (15) . . . . . A/C vent is unsecure and the LED light is also not properly secure to ceiling. (16) The portable generator storage area has light fixtures missing covers and there is a cable wiring running through a soffit vent hole. The soffit vent hole screen is in disrepair. (17) The courtyard on the west side of the property has cracks along the exterior wall; there is mildew buildup on roof . . . . ; there is an irrigation box in the ground missing a cover and there is mildew buildup on exterior wall. An interview with the Administrator on . . . . . at 1:00 PM, acknowledged all of the findings and	A 152		

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A 152	Continued From page 5 provided no further explanation. Class III	A 152		