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
	AL11964990	A. BUILDING: _____ B. WING _____	03/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EMERALD PARK OF HOLLYWOOD	5770 STIRLING ROAD HOLLYWOOD, FL 33021

(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 Complaint (#2023013159, #2024000057, #2024001497, #2024001779, #2024001831) survey was conducted on [redacted] at Emerald Park of Hollywood. The facility had deficiencies related to complaints 2024001779 and 2024001831 at the time of the survey. Note: This survey was conducted in conjunction with the revisit to Complaint (#2023012435) survey conducted on the same date. See separate report for findings.	A 000		
A 026	59A-36.007(2) FAC Resident Care - Social & Leisure Activities (2) SOCIAL AND LEISURE ACTIVITIES. Residents shall be encouraged to participate in social, recreational, educational and other activities within the facility and the community. (a) The facility must provide an ongoing activities program. The program must provide diversified individual and group activities in keeping with each resident's needs, abilities, and interests. (b) The facility must consult with the residents in selecting, planning, and scheduling activities. The facility must demonstrate residents' participation through one or more of the following methods: resident meetings, committees, a resident council, a monitored suggestion box, group discussions, questionnaires, or any other form of communication appropriate to the size of the facility. (c) Scheduled activities must be available at least 6 days a week for a total of not less than 12 hours per week. Watching television is not an activity for the purpose of meeting the 12 hours per week of scheduled activities unless the	A 026		

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A 026	Continued From page 1 television program is a special one-time event of special interest to residents of the facility. A facility whose residents choose to attend day programs conducted at adult day care centers, senior centers, mental health centers, or other day programs may count those attendance hours towards the required 12 hours per week of scheduled activities. An activities calendar must be posted in common areas where residents normally congregate. (d) If residents assist in planning a special activity such as an outing, seasonal festivity, or an excursion, up to 3 hours may be counted toward the required activity time. This Statute or Rule is not met as evidenced by: Based on observation and interview the facility failed to provide Scheduled activities at least six (6) days a week for a total of not less than 12 hours per week for twelve (12) of thirteen (13) Residents sampled/or interviewed (Residents 1, 4,5,6,7,8,9,10,11,12, 13,14). The Findings Include: Observation of residents by this surveyor on [redacted] revealed residents in the Activity/TV room located on the first floor in the Northeast section of the facility, watching TV or asleep. Residents were also observed on the patio just outside the double doors of the room smoking and talking to each other as there were no structured activities observed being provided to the residents: In an interview with Resident #1 on [redacted] at 4:18 PM he stated things got a little bit better, but they have no activities, so he plays games and reads books on his laptop.	A 026		

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A 026	Continued From page 2 In an interview with Resident #4 on . . . . . at 10:01 AM he stated there are no activities provided to them and he just watches TV all day. In an interview with Resident #5 on . . . . . at 10:05 AM she stated there are no activities provided. In an interview with Resident #6 on . . . . . at 10:08 AM she stated she is bored to because they don't have any activities. She stated someone used to come in and sing, but nothing anymore. In an interview with Resident #7 on . . . . . at 10:13 AM that he is so-so, the staff is okay, but that there are no activities. In an interview with Resident #9 on . . . . . at 10:19 AM she stated the facility stopped the activities so there is nothing to do, so people stay in their rooms. In an interview with Resident #10 on at 10:48 AM she stated there is not enough staff (just 1 per floor) and that they don't any have activities. In an interview with Resident #11 on . . . . . at 10:54 AM he stated they don't help him with anything and that there are no activities. In an interview with Resident #12 on . . . . . at 11:16 AM he stated they clean his room; staff is okay and that there are no activities provided for them. In an interview with Resident #13 on at 11:46 AM he stated that "it sucks" (referring to the facility). He further stated there are no	A 026		

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A 026	Continued From page 3 activities for the residents. In an interview with Resident #14 on [redacted] at 11:54 AM he stated that "nothing has changed." He stated that yesterday he had a puddle of water in his room and that they have no activities, none, so he does things himself. Class III	A 026		
A 093	59A-36.012(2) FAC Food Service - Dietary Standards (2) DIETARY STANDARDS. (a) The meals provided by the assisted living facility must be planned based on the current USDA Dietary Guidelines for Americans, 2020-2025, which are incorporated by reference and available for review at: http://www.flrules.org/Gateway/reference.asp?No=Ref-04003, and the current table of Dietary Reference Intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academies, 2019, which are incorporated by reference and available for review at: https://ods.od.nih.gov/HealthInformation/Dietary_Reference_Intakes.aspx. Therapeutic diets must meet these nutritional standards to the extent possible. (b) The residents' nutritional needs must be met by offering a variety of meals adapted to the food habits, preferences, and physical abilities of the residents, and must be prepared through the use of standardized recipes. For facilities with a licensed capacity of 16 or fewer residents, standardized recipes are not required. Unless a resident chooses to eat less, the facility must serve the standard minimum portions of food	A 093		

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A 093	Continued From page 4	A 093		

according to the Dietary Reference Intakes.
(c) All regular and therapeutic menus to be used by the facility must be reviewed annually by a licensed or registered dietitian, a licensed nutritionist, or a registered dietetic technician supervised by a licensed or registered dietitian, or a licensed nutritionist to ensure the meals meet the nutritional standards established in this rule. The annual review must be documented in the facility files and include the original signature of the reviewer, registration or license number, and date reviewed. Portion sizes must be indicated on the menus or on a separate sheet.
1. Daily food servings may be divided among three or more meals per day, including snacks, as necessary to accommodate resident needs and preferences.
2. Menu items may be substituted with items of comparable nutritional value based on the seasonal availability of fresh produce or the preferences of the residents.
(d) Menus must be dated and planned at least 1 week in advance for both regular and therapeutic diets. Residents must be encouraged to participate in menu planning. Planned menus must be conspicuously posted or easily available to residents. Regular and therapeutic menus as served, with substitutions noted before or when the meal is served, must be kept on file in the facility for 6 months.
(e) Therapeutic diets must be prepared and served as ordered by the health care provider.
1. Facilities that offer residents a variety of food choices through a select menu, buffet style dining, or family style dining are not required to document what is eaten unless a health care provider's order indicates that such monitoring is necessary. However, the food items that enable residents to comply with the therapeutic diet must

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A 093	Continued From page 5 be identified on the menus developed for use in the facility. 2. The facility must document a resident's refusal to comply with a therapeutic diet and provide notification to the resident's health care provider of such refusal. (f) For facilities serving three or more meals a day, no more than 14 hours must elapse between the end of an evening meal containing a protein food and the beginning of a morning meal. Intervals between meals must be evenly distributed throughout the day with not less than 2 hours nor more than 6 hours between the end of one meal and the beginning of the next. For residents without access to kitchen facilities, snacks must be offered at least once per day. Snacks are not considered to be meals for the purposes of the time between meals. (g) Food must be served attractively at safe and palatable temperatures. All residents must be encouraged to eat at tables in the dining areas. A supply of eating ware sufficient for all residents, including adaptive equipment if needed by any resident, must be on . (h) A 3-day supply of nonperishable food, based on the number of weekly meals the facility has with residents to serve, must be on at all times. The quantity must be based on the resident census and not on licensed capacity. The supply must consist of foods that can be stored safely without refrigeration. Water sufficient for drinking and food preparation must also be stored, or the facility must have a plan for obtaining water in an emergency, with the plan coordinated with and reviewed by the local disaster preparedness authority. This Statute or Rule is not met as evidenced by: Based on observation and interview the facility failed to purchase/secure/or store food adequate	A 093		

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A 093	Continued From page 6 for daily/or emergency use for a census of ninety-two (92) Residents. And to ensure an adequate amount/choice of food items are available and the meals are palatable. The Findings Include: During a complaint survey conducted at the facility by this surveyor on . . . . . observation was made of the facility's dry storage room which revealed seven metal shelves with each containing 4 rows of shelving. observation was made of one pallet (. cans) each of Cream of Mushroom soup, Cream of Chicken soup, chicken and dumpling, Yams, five boxes of Quick Oats (oatmeal), along with a small assortment of other items and condiments (photo evidence obtained). Observation of a second dry food storage room revealed several boxes of Corn Flakes, a pallet containing 12 cans of corn, two pallets of soup containing 12 cans each, a pallet (6 cans) of chicken, pallet of Stew (9 cans), pallets, four pallets of juice (9 cans each) and a small assortment of other food items (photo evidence obtained). During the tour of the facility kitchen this surveyor also made observation of the facility's walk-in refrigerator, which revealed four metal shelves each containing 4 racks of shelving. Observation also five of the shelves had boxes of frozen food items and one with two large plastic bags of foods stuff (photo evidence obtained). Observation of the facility's walk-in refrigerator revealed five metal shelves with each having four shelves. This surveyor made observation of the few items in the refrigeration included three boxes	A 093		

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A 093	Continued From page 7 of Iceberg lettuce, a large potato sack . . full and no other items such as produce, milk, or fruit was observed. In an interview with Resident #5 on . . . . . at 10:05 AM stated the food is not good (Resident was awaiting service in the dining room while sitting in her manual wheelchair). In an interview with Resident #6 on at 10:08 AM she stated the food is so-so. In an interview with Resident #7 on . . . . . at 10:13 AM he stated the food isn't that good. In an interview with Resident #9 on at 10:19 AM she the people here are hungry because they don't have enough food, and it's not that good. In an interview with Resident #10 on . . . . . at 10:48 AM she stated the food is horrible and there is not enough of it. In an interview with Resident #11 on . . . . . at 10:54 AM the food here is bad. In an interview with Resident #12 on at 11:16 AM the food is not that good. In an interview with Resident #13 on . . . . . at 11:46 AM the stated "it sucks, the food sucks." In an interview with Resident #14 on at 11:54 AM he that "nothing has changed." He also stated the food is still bad. In an interview with Resident #1 on at 4:18 PM he stated the food is awful, the vegetables are way overcooked and soggy.	A 093		

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A 093	Continued From page 8 In an interview with the Administrator on . . . . . at 5:18 PM she stated she adjust the menus after speaking with the residents. She further stated in the interview at 5:23 PM that there are sandwiches made and that she is the person who picks up the trays in the morning. She stated she has fruit cups and other things for them and that there are . . . . . snacks available. She further stated that she fully changed the menu when she started in . . . . . , and it was fine. Now it's to being bad. She stated she already has a meeting scheduled with the kitchen staff, servers and staff. As for ordering of food items, she stated they order weekly from (food vendor names provided). Class III	A 093		
A 152	59A-36.014(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	A 152		

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A 152	Continued From page 9 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 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 ensure a safe living environment for thirteen (13) of thirteen (13) Residents sampled/or interviewed (1, 2,4,5,6,7,8,9,10, 11,12, 13, 14). The Findings Include: During the tour of the facility by this surveyor on several issues of concern were observed: Observation by this surveyor was made of ceiling tile in the hallway across from was wet with a mold-like substance on it. Observation of by this surveyor revealed a mold-like substance on the southwest	A 152		

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A 152	Continued From page 10 section of the ceiling which may have resulted from the leak in the ceiling. Observation also revealed the vinyl flooring near the bathroom/bedroom area was ripped and sticking up, which could present a tripping hazard. Observation of . . . . . by this surveyor revealed the carpet under the threshold outside the room was ripped and partially removed with the carpet glue exposed (Photo obtained). Observation of by this surveyor revealed the wall air-conditioning (AC) unit had leaked into the resident's room and water was on the floor underneath the unit and throughout the area where the bed is located Towels were placed on the floor to assist in drying up the water (photos obtained). Observation of by this surveyor revealed a section of the baseboard protruding out from the wall which could present a tripping hazard as the residents of the room use a walker and wheelchair. Observation by this surveyor was made of wet ceiling tiles located by . . . . . (Laundry room), and missing tiles in the hallway ceiling near . . . . . . Observation of . . . by this surveyor revealed that it was vacant, but had a loud . . . -like smell, dirty/unclean clothing strewn throughout it, and a missing wall AC unit with the section of the wall where it was located partially covered which could allow pest to enter the room (Photo obtained). Observation by this surveyor was made of missing ceiling tiles located in the Southwest	A 152		

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A 152	Continued From page 11 section of the hall, just to the left of the elevator, with water dripping from area of the missing tiles into a bucket on the floor. In an interview with the Maintenance Director on at 4:32 PM he stated there is a water pump on the ceiling that he has to get a seal for that is causing the leaks in the ceiling (photo evidence obtained). Observation was made by this surveyor of soiled/or dirty carpeting throughout the hallways and common areas on the second, third and fourth floors (photo evidence obtained). In an interview with the Administrator on at 5:02 PM she stated that they have had the carpets cleaned several times, and no matter how hard you try (to keep them clean) the residents get them dirty again. Additionally, observation by this surveyor on revealed a 5 - 6 industrial laundry hamper by the wall with clothing on top of it; and a large garbage can by the wall with clothing stacked over the top in the Southwest section of the hallway on the 4th floor, both requiring washing (photo evidence obtained). Observation of the laundry room (430) located in the Southwest section of the 4th floor revealed a floor clothing hamper stacked to the top, laundry on the washer and dryer and small refrigerator on a table. Observation of the laundry room also revealed one (1) residential sized washer and one (1) residential sized dryer that is used to wash resident's clothes (photo evidence obtained). Observation of the 3rd floor's laundry room located in the Southwest section (directly beneath the 4th floor laundry room) revealed two small empty laundry hampers and a residential washer	A 152		

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A 152	Continued From page 12 and dryer. Observation revealed clothing inside the washer being washed, and a load of clothing on top of the residential washer waiting to be washed (photo evidence obtained). In an interview with Resident #4 on at 10:01 AM he stated he needs more help getting services and that there is not enough help, and the laundry is always late getting cleaned and to you. In an interview with Resident #10 on at 10:48 AM he stated that she is , and they only change her 1 time per shift, and she gets her laundry days later than she should. In an interview Resident #12 on at 11:16 AM he stated they clean his room, and his laundry is done whenever they get to it. In an interview with Resident #14 on at 11:54 AM that "nothing has changed," he does things himself including their laundry (resident is in a wheelchair) because he would be waiting forever to get help. Class III	A 152		