STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964990	07/06/2016
NAME OF PROVIDER OR SUPPLIER **EMERALD PARK RETIREMENT, LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **5770 STIRLING ROAD HOLLYWOOD, FL 33021**	

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

0000 Initial Comments

A licensure complaint survey, CCR #2016007565, was conducted on 07/06/2016. The Emerald Park Retirement had deficiencies identified during this visit.

0152 Physical Plant - Safe Living Environ/Other

Based on observation and interview, the facility failed to provide a safe and comfortable living environment to the residents by not maintaining its air conditioning systems within the facility in working order.

The findings included:

In an interview with the facility's Maintenance Technician on at 9:50 AM, he stated that there was one air conditioning (a/c) unit on the 1st floor which was not in working order and it affected 2 areas; the 1st floor lobby and main dining . He stated that the a/c unit broke about 1 month ago and an a/c contractor was being sought to replace this a/c unit.

In an interview with Resident #2 on at 9:55 AM, she stated that she was living there for about 1 year and she was not too pleased there. She stated that she was not comfortable with the elevated temperatures in the lobby and dining that the a/c unit has not been working properly for "several weeks".

In an observation on at 10:40 AM, the 4th floor a/c the north end of the facility, the return air grill was excessively soiled with dust and dirt. In an interview with the Maintenance Technician, at this time, he stated that the a/c system was supposed to be cleaned and properly maintained every month, but it presented that this a/c grill was overlooked. During an observation at this time, it was noted that the supply a/c grill on the 4th floor north hallway was dripping with condensation.

In an interview with Resident #4 on at 10:50 AM, she stated that she has been living at the facility for a few years and she was not too pleased with the lack of adequate air conditioning in the lobby and dining . She stated that she was not comfortable with the elevated temperatures in the lobby and dining felt "warm".

In an observation on at 10:52 AM, of the medication (located next to the dining), there was a portable a/c unit which was turned on to cool the air. It was determined that the portable a/c unit did not sufficiently cool the air in this area to remain comfortable, the noted to be extremely warm.

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In an interview with Caregiver #1 on 07/06/2016 at 10:55 AM, she stated that the facility's a/c system had been broken for several months. In an interview with Caregiver #2, at this time, she stated that the a/c system has been broken since 2015 and the facility just brought the portable a/c units onsite about 1 month ago. She stated that the residents were uncomfortable with the increased temperature and humidity, since the portable a/c units could not sufficiently cool the air in the lobby and dining , which included the medication .

In an interview with the facility's Chef on at 11:00 AM, he stated that the kitchen's a/c system had been lately and the a/c contractors just fixed it on . He stated that the a/c problems in the kitchen were intermittent and were usually corrected within a few days to a week. He stated that the lobby and dining been significantly affected from the a/c system for about 2 months. He stated that the portable a/c units did not provide sufficient air cooling capacity to those areas.

In an interview with the kitchen associate on at 11:10 AM, she stated that the a/c system had been broken for several months and the facility brought the portable a/c units about a month ago. She stated that the portable a/c units did not provide a sufficient capacity to cool the lobby and dining air.

In an interview with the Administrator on at 11:15 AM, she stated that she received a total of 4 resident complaints relating to the elevated temperature in the facility lobby and dining . She stated that the same 4 residents complained since about 2016, which was the time that she recalled the a/c system . She stated that the kitchen's a/c system was also not working, but the a/c contractor fixed that system on .

In an interview with the facility's Corporate Representative on at 11:30 AM, he stated that the facility determined that the a/c system powering the facility's lobby and dining to be replaced in 2016. He stated that the facility received estimates from 2 a/c contractors to replace the affected a/c units but has not made a decision to purchase the new units.

In an interview with the a/c contractor on at 2:15 PM, he stated that from 2015 to present, the facility's a/c systems have been going " up and down" and his company technicians have responded to the facility anywhere from 6-12 times since . He stated that the a/c systems that have been affected, were the ones supplying air to the lobby, dining kitchen. He stated that their last response to the facility was on to repair the kitchen's a/c system which blew a transformer and low volt wires. He stated that it's a/c systems are likely still repairable, but in the last 2 months, it has become more evident that it will be better to replace the a/c units. He stated that his

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company gave the facility both options and the facility has chosen to keep repairing the a/c units. He stated that he has given the facility a quote to replace the a/c systems and he was waiting for a final decision from the facility.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Emerald Park Retirement, LLC
5770 Stirling Road
Hollywood, FL 33021

RE: CCR #2016007565

Dear Administrator:

This letter reports the findings of a complaint survey that was conducted on , 2016 by a representative of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. **Please attach a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents to the Field Office no later than , 2016.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiencies identified on your survey, which may include a desk review or onsite revisit.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD
Enclosure

XG90

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