

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 02/14/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 10G027	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 01/17/2019
NAME OF PROVIDER OR SUPPLIER SUNLAND CENTER MARIANNA-FACILITY II			STREET ADDRESS, CITY, STATE, ZIP CODE 3700 WILLIAMS DRIVE MARIANNA, FL 32446		
(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) COMPLETION DATE
W 000	INITIAL COMMENTS An unannounced complaint survey for allegations contained within CCR#2019000702 was conducted 01/17/2019 at Sunland Center Marianna Facility II Intermediate Care. The facility was found not to be in compliance with 42 CFR 483, Subpart I, Requirements for Intermediate Care Facilities.	W 000			
W 104	GOVERNING BODY CFR(s): 483.410(a)(1) The governing body must exercise general policy, budget, and operating direction over the facility. This STANDARD is not met as evidenced by: Based on observation, interview and record review, the governing body failed to exercise operating direction for 1 of 7 houses to provide needed building repairs for water temperatures. (Pierce house) The findings included: On 1/17/18 at approximately 10:00am, a tour of the Pierce House was conducted with life safety and the facility's maintenance staff. Upon conducting water temperatures, room # 1, room #8, and the kitchen were found to have no hot water. On 1/17/19 at approximately 10:06am, an interview with Staff D and Staff E who reported that room # 1, room #8, and the kitchen did not have hot water. Staff D reported that the water had been out since the hurricane in October and staff had been heating water in bowl in microwave	W 104			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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02/08/2019

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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W 104	Continued From page 1 to clean kitchen in the house. Both staff reported maintenance had been notified. On 1/17/19 at approximately 10:15am, an interview with client #1 revealed that she did not have hot water in her bathroom and had to use another client's bathroom to bath. On 1/17/19 at approximately 10:27am, an interview with the Human Services Senior Supervisor (HSSS) revealed that on 11/13/18 she submitted a work order for room #8 due to cold water in the shower to the staff assistant. Record review conducted of work order receipt on computer with HSSS confirmed a work order was submitted. On 1/17/19 at approximately 1:30pm, an interview with the Program Operations Administrator (POA) revealed that he was not aware that Pierce house did not have hot water in room # 1, room #8, and the kitchen. POA reported that staff had not brought this to his attention that they were heating water in bowls in microwave.	W 104			
W 426	CLIENT BATHROOMS CFR(s): 483.470(d)(3) The facility must, in areas of the facility where clients who have not been trained to regulate water temperature are exposed to hot water, ensure that the temperature of the water does not exceed 110 degrees Fahrenheit. This STANDARD is not met as evidenced by: Based on observation and interview the facility failed to regulate water temperature and ensure that the temperature of the water does not	W 426			

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W 426	<p>Continued From page 2</p> <p>exceed 110 degrees Fahrenheit for 1 of 7 house (Pierce house room 4 tub)</p> <p>The Findings:</p> <p>On 1/17/19 at approximately 10:00 am observation and water temperatures taken in Pierce house with life safety and facility's maintenance staff. Water temperature taken in room 4, tub which registered at 116 degrees. Interview with facility's maintenance staff who reported not being aware of that the bath tub water registered at 116 degrees.</p> <p>On 1/17/19 interview with Staff D who reported that the house no longer keep water temperature log. Stated that staff supposed to test water before client's take a bath.</p>	W 426			

Agency for Health Care Administration

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**3700 WILLIAMS DRIVE
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I 000	Initial Comments An unannounced complaint survey (CCR2019000702) was conducted on 1/17/2019 at Sunland Center Marianna Facility II Intermediate Care. At the time of the complaint there was state deficient practice identified.	I 000		
I3000 SS=D	59A-26.015 (1)-(2)(a)-(g) FAC Plant Maintenance and Housekeeping (1) The facility must maintain the interior and exterior of buildings accessible to clients and all equipment, furniture, and furnishings in a clean manner and in such condition such that client safety and well-being are not jeopardized. (2) Each licensee must establish written policies designed to maintain the physical plant and overall ICF/DD environment in such a manner that the safety and well-being of clients are ensured. The building and mechanical maintenance program must be under the supervision of a qualified person, as determined by the facility. All mechanical and electrical equipment must be maintained in working order, and must be accessible for cleaning and inspecting. All mechanical systems must be tested, balanced and operated prior to being placed into service and maintained in good working order. The facility must have a written plan for maintenance, including record keeping, sufficient staffing, equipment, and supplies. The licensee must: (a) Maintain the building in good repair, safe and free of the following: cracks in the floors, walls, or ceilings; peeling wallpaper or paint; warped or loose boards; warped, broken, loose, or cracked floor covering, such as tile, linoleum or vinyl; loose handrails or railings; loose or broken window panes and screens; and other similar hazards;	I3000		

AHCA Form 3020-0001

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I3000	<p>Continued From page 1</p> <p>(b) Maintain all electrical, lighting (interior and exterior), signal, mechanical, potable water supply, hot water heaters, heating, air conditioning, fire protection and sewage disposal systems in safe, clean and functioning condition;</p> <p>(c) Maintain all electrical cords and appliances in a safe and functioning condition;</p> <p>(d) Maintain the interior and exterior finishes of the buildings as needed to keep them clean and safe, to include painting, washing, and routine maintenance;</p> <p>(e) Maintain all furniture and furnishings in a clean and safe condition;</p> <p>(f) Maintain the grounds free from refuse, litter, insect, vermin, and vermin breeding areas; and,</p> <p>(g) Maintain screens on windows and doors in good repair, free of breaks in construction.</p> <p>This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the governing body failed to exercise operating direction for 1 of 7 houses to provide needed building repairs for water temperatures. (Pierce house)</p> <p>The findings included:</p> <p>On 1/17/18 at approximately 10:00am, a tour of the Pierce House was conducted with life safety and the facility's maintenance staff. Upon conducting water temperatures, room # 1, room #8, and the kitchen were found to have no hot water.</p> <p>On 1/17/19 at approximately 10:06am, an interview with Staff D and Staff E who reported that room # 1, room #8, and the kitchen did not have hot water. Staff D reported that the water had been out since the hurricane in October and staff had been heating water in bowl in microwave</p>	I3000		

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I3000	<p>Continued From page 2</p> <p>to clean kitchen in the house. Both staff reported maintenance had been notified.</p> <p>On 1/17/19 at approximately 10:15am, an interview with client #1 revealed that she did not have hot water in her bathroom and had to use another client's bathroom to bath.</p> <p>On 1/17/19 at approximately 10:27am, an interview with the Human Services Senior Supervisor (HSSS) revealed that on 11/13/18 she submitted a work order for room #8 due to cold water in the shower to the staff assistant. Record review conducted of work order receipt on computer with HSSS confirmed a work order was submitted.</p> <p>On 1/17/19 at approximately 1:30pm, an interview with the Program Operations Administrator (POA) revealed that he was not aware that Pierce house did not have hot water in room # 1, room #8, and the kitchen. POA reported that staff had not brought this to his attention that they were heating water in bowls in microwave.</p>	I3000		