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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 105445 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 12/02/2025 |
| NAME OF PROVIDER OR SUPPLIER Aviata at University Hills | | STREET ADDRESS, CITY, STATE, ZIP CODE 10040 Hillview Road Pensacola, FL 32514 | |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

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| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information) |
| <p>F 0919</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>Make sure that a working call system is available in each resident's bathroom and bathing area.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, interviews, and record reviews, the facility failed to maintain resident call lights in 8 out of 67 rooms. (Rooms 101, 127, 151, 201, 204, 209, 231, and 252)The findings include: On 12/1/2025, a walkthrough of the building was performed with the Maintenance Director. Every resident's room was checked for functioning call lights in the beds and bathrooms. During the walkthrough, rooms 204A and B, 209A and B, 201A and B, 231A and B, 252A and B, 151A and B, 127A, and 101A and B were observed with nonfunctioning call lights.On 12/1/2025 at 10:30 am, Resident # 3 was interviewed. She stated she needs to have a bell at the bedside to make sure she can call the nurses but stated she cannot because the call light sometimes does not work.On 12/1/2025 at 10:40 am, Resident #1 was interviewed. She explained that, for a long time, her call light was not working, and the nurses gave her a bell to call for assistance. She stated the nursing aides appear irritated when she uses the bell and ask her why she keeps ringing the bell. She added that the call light is working now but is not reliable and that is why she keeps the bell at bed side.On 12/1/2025 at 10:50 am, the Maintenance Director was interviewed. He stated that he has been working in the facility for 4 months. He explains the process of placing a request for service in the facility through a program the nurses use to report on any broken equipment. This program will alert him when an order comes through. He explained the process he would follow to find outside repair services for any call light issues. He stated that the call lights malfunction so often because of electrical malfunctions in the building. He stated that the nurses give bells to the patients to make sure they are going to be able to call the nurses if they need assistance. He stated that residents that cannot use the bell are moved closer to the nursing station to be watched. He stated that, at this time, there were no broken call lights reported in the building.At the 100 and 200 hall nurse stations, Staff N, a Certified Nursing Aide, reported that the call light panel does not always illuminate when a resident activates their call light. When room [ROOM NUMBER] Bed B was tested, the call light did not illuminate in the panel at the nurse's station. The Maintenance Director explained that he reported this to the Administration. He stated that they acknowledged the issue and explained that the system uses outdated bulbs that cannot be replaced. Staff N stated that when they hear a call alert at the nurse's station, they must often go to the hallway to identify which room light is on. Staff N stated that many times the lights do not illuminate, so they provide bells to use when the call lights do not work.</p> |

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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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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