STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	105664	A. Building B. Wing	06/30/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Gainesville Health and Rehabilitation	4000 SW 20th Ave Gainesville, FL 32607

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

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. Based on observation, interview, and record review, the facility failed to maintain a clean and homelike environment for 2 of 6 residents (Residents #3 and #4) and in 1 of 3 resident units (Unit 2) reviewed for homelike environment.Findings include:During an observation on 6/28/2026 at 9:38 AM, there was a large amount of black and brown debris on the floor on the right side of Resident #4's bed.During an interview on 6/28/2026 at 9:38 AM, Resident #4 stated, It has been 2-3 days since anyone mopped my floor.During an observation on 6/28/2026 at 9:46 AM, in Resident #3's room, there were visible dirt and debris on the floor of the room on the right side of the bed and along the wall (Photographic evidence obtained).During an observation on 6/28/2026 at 11:40 AM, there was a piece of flooring missing in the hallway of unit 2 (Photographic evidence obtained).During an interview on 6/28/2026 at 11:53 AM, the Maintenance Director stated that he was aware of the missing flooring in the Unit 2 hallway, and that peel and stick flooring had been ordered.During an interview on 6/28/2026 at 12:00 PM, the Maintenance Director viewed the soiled floors in Resident #3 and Resident #4's rooms and stated, Those rooms should not have looked like that this morning.During an interview on 6/28/2026 at 12:48 PM, Staff E, Certified Nursing Assistant (CNA), stated, We don't have a lot of housekeepers. After 3:00 [PM], there is no one really there to clean up.Review of the facility policy and procedure titled Safe and Homelike Environment reviewed on 7/15/2025 read, Policy: In accordance with residents' rights, the facility will provide a safe, clean, comfortable and homelike environment, allowing the resident to use his or her personal belongings to the extent possible. Policy Explanation and Compliance Guidelines: 3. Housekeeping and maintenance services will be provided as necessary to maintain a sanitary, orderly, and comfortable environment.

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.

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	105664	A. Building B. Wing	06/30/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Gainesville Health and Rehabilitation	4000 SW 20th Ave Gainesville, FL 32607

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

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0725 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift. Based on interview, observation, and record review, the facility failed to have sufficient nursing staff to assure residents maintained the highest practicable physical, mental, and psychosocial well-being in 3 of 3 resident units reviewed for sufficient staffing.Findings include:During an interview on 6/28/2026 at 6:40 AM, Staff J, Registered Nurse (RN), stated, I work night shift 7p-7a [7 PM to 7 AM]. I had 24 residents assigned to me last night. I am not in charge, but I am an RN. We do not have a supervisor or a charge nurse right now.During an interview on 6/28/2026 at 6:56 AM, Staff A, Certified Nursing Assistant (CNA), stated, I had 36 residents last night. There have been times I have had 37. I am not able to give the best care when I have this many residents. I am tired. There have been times I have had to stay over past the end of my shift because my relief wasn't here.During an interview on 6/28/2026 at 6:59 AM, Staff B, Licensed Practical Nurse (LPN), stated, Right now I have 23 residents and my CNA has 36 residents.During an interview on 6/28/2026 at 7:18 AM, Staff C, CNA, stated, I had 28 residents last night. We work 8-hour shifts. We have 28 total residents on this unit. Normally we have 2 CNAs, but last night we only had 1.During an interview on 6/28/2026 at 7:25 AM, Staff D, LPN, stated, Sometimes there are staffing issues. There are only 2 CNAs today on this unit.Review of the facility census and timesheets for Saturday, 6/27/2026, showed that the facility census was 104. Review of staff timesheets showed that from 11:00 PM until 7:00 AM, there were five nurses and three CNAs clocked in.During an interview on 6/28/2026 at 9:05 AM, Resident #6 stated, It takes a while to get assistance when I call. We need more staff. I have had to wait for up to one hour.During an observation on 6/28/2026 at 9:07 AM, Resident #2's call light was activated. Two staff members were observed walking past Resident #2's activated call light between 9:07 AM and 9:24 AM. Call light was not answered until 9:26 AM.During an interview on 6/28/2026 at 9:30 AM, Resident #2 stated, It takes them a long time to answer my call light. Sometimes, I have to wait for over an hour for them to change me. I don't think they have enough staff.During an interview on 6/28/2026 at 9:38 AM, Resident #4 stated, When I push my call light, it just stays on for hours and no one comes to help me.During an interview on 6/28/2026 at 9:46 AM, Resident #3 stated, They always take forever to answer my call light. I think they are short of CNAs because it takes way too long to answer the call lights. The response time is really slow. I can't always find a CNA when I need one. I have been here for 8 months and I have been trying to transfer out of here the past few months, but it keeps getting set back because the social workers keep leaving. I have already been accepted to an ALF [assisted living facility] in the town I live in. I have had to call my own insurance company and [name of medical supply company].During an interview on 6/28/2026 at 12:48 PM, Staff E, CNA, stated, The Owners don't want to pay overtime. They would rather us work short and not have people come in because they have overtime. I normally work 3-11 shifts. We have been down to one aide per hallway, over 30 patients each. At one point a couple of weekends ago, they only had two CNAs in the building. Quite often, I can't get a break because of staffing.During an interview on 6/28/2026 at 1:15 PM, Resident #5 stated, They don't have no staff here. When I use the call light, it takes about 40 minutes to an hour for someone to come in. I have to be fed, and sometimes by the time they are able to feed me, my food is cold. They just had to call a bunch of people to come in because State is here, but on Sundays, we never have any staff. I have been trying to get back to where I live, I am from the Tallahassee area, and every time they get ready to move me, something happens. I think they have been through about five social workers. They have one now, but she has only been here for about 3 days.During an interview on 6/28/2026 at 1:40 PM, the Administrator stated, The staffing Coordinator was not working, and she was doing personal things on the clock, so I had to let her go. I had to call in four people to help today because sometimes the staff no-call no show. I called the CNA in charge of Central Supply, the activities manager, who is a CNA, and the transportation person is a CNA, so they all came in today to help. We have a new Social Services Director who started Monday of last week. (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	105664	A. Building B. Wing	06/30/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Gainesville Health and Rehabilitation	4000 SW 20th Ave Gainesville, FL 32607

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

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0725 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	The social workers have just been coming to work for a few months and then leaving. Payroll was delayed because we had to review the overtime. May 29th was payday and no one was paid on that day because of the delay.During an interview on 6/29/2026 at 9:35 AM, the Director of Nursing stated, We were short again June 6 and June 7 because they took their whole checks and did not pay the overtime that week. That weekend all of the management came in, and the Maintenance Director came in. I worked on Friday from 9 AM-11 PM and then Saturday I worked 8 AM-1 AM. My whole nurse management team worked those hours. It was short that night too, and I begged for agency to come in. They did not arrange any agency staff. I got some nurses to come in for nightshift around 1 AM. The next morning June 7, it was short again. When I try to get CNAs to come in for overtime, [Administrator's name] and the [Medical Director's name] say no.During an interview on 6/29/2026 at 11:35 AM, Staff F, CNA, stated, We are not allowed to get overtime unless nobody else wants to come in. They are trying to hire more CNAs, but no one wants to work here. I want to work more hours, but they say it is too much overtime. Staffing issues have impacted patient care. We can't provide exceptional care, only the bare minimum- shower, feed and change. It is not fair, and I don't think everyone gets the attention they need and deserve.During an interview on 6/29/2026 at 11:55 AM, Staff G, CNA, stated, I normally work 7-3, I've been working in the facility for about four years. We had staffing that was in house and it was great. We knew the schedule ahead of time and who would be in the building. They changed the staffing to remote, and we have to call a number now. Now we are short almost every day. This has been going on for about three months. When we come in, we don't know who is on what station. Our nurses pretty much assign us. We used to have assigned groups, now it is all over the place. We don't know who is in the building and who is actually coming in to work. We have 29 beds on Station 3. The weekend before last [June 21st] on 7-3 shift, I was the only one on the schedule for my unit, but they called someone in and they came in three hours later. For the most part, they can scramble and get someone here, but the workload is still crazy for the pay and treatment that we get.During an interview on 6/29/2026 at 1:34 PM, the Administrator stated, Personally I go in and check that we have enough staff. We have PRNs [as needed staff] and other people. We were supposed to have a job fair this morning and every Tuesday. We have people to come in for orientation. The main complaint from staff is that we had a staffing person here, but now have to use remote scheduling. I know it has been short. It has been this way for maybe a month. I think because we swapped from having a physical employee to using [name of remote staffing agency]. That was a big change. The staff have to talk to people who are far away, so that makes a big difference. The call outs and no shows got worse after the delayed paychecks. That is when we started having no call no shows. In the past one to two weeks, I was here, I put an advert on [name of job advertising website]. Staffing fluctuates. There were two weekends in this month that were short.During an interview on 6/29/2026 at 2:50 PM, the Director of Nursing stated, I begged them for agency and they won't do it. When someone is called in, the overseas staffers don't add it to the schedule. Staff have to call out two hours before their shift. The staffers do not tell us about staffing issues until less than 2 hours before the end of the shift.During an interview on 6/29/2026 at 4:29 PM, the Housekeeping Director stated, We have outsourced schedulers now, and there are some issues with communication between the nurses and the schedulers.During an interview on 6/30/2026 at 4:15 PM, the Director of Nursing stated, The nurses make the assignments on the floor. We do not have a designated night supervisor for 11-7. It is whoever the RN is. When there is more than one RN, they would need to decide amongst themselves who is in charge. When there is a shortage of CNAs and there are extra nurses, the nurses should have been used as aides. Three nurses should have been on the med carts, and any additional nurses should have taken aide assignments on the floor.During an interview on 6/30/2026 at 4:30 PM, the Administrator stated, When the new ownership came in, we started using [Name of remote staffing agency]. We did education for the department heads on [name of remote staffing agency]. It was affecting staffing at the time, because staff didn't know how to use [name of remote staffing agency]. Our HR [Human Resources] person covers two buildings and (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	105664	A. Building B. Wing	06/30/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Gainesville Health and Rehabilitation	4000 SW 20th Ave Gainesville, FL 32607

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

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0725 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	comes twice a week. The HR Manager did education with the department heads so that they could train the staff. On that app, you can choose your shifts. Staff call the 561 number to call out. [The Director of Nursing's name] told the staff to call the number and to also inform her when they call out. We have been using [name of remote staffing agency] since April. The issue of no-call, no-shows started when paychecks were delayed. Some people walked out and nurses had to be CNAs that day. A few people still no-call no-show, but not as intense as that.An interview was attempted via phone call with the Medical Director/Owner on 6/29/2026 at 2:42 PM. No answer was received and the voicemail box was full.An interview was attempted via phone call with the Medical Director/Owner on 6/30/2026 at 4:00 PM. No answer was received and the voicemail box was full.During an interview on 6/30/2026 at 4:37 PM, the Director of Nursing stated, On 11-7, we don't have a designated charge nurse or supervisor, but we have an RN on every 11-7 shift. We had low weekend staffing, but we brought people in, so we could fix the numbers. Some employees have no call no showed after the situation with the paychecks.Review of the facility census and timesheets for Friday, 5/22/2026 showed that the facility census was 106. Review of staff timesheets showed that from 2:18 AM until 7:00 AM, there were three CNAs and three nurses clocked in.Review of the facility census and timesheets for Saturday, 6/6/2026 showed that the facility census was 106. Review of staff timesheets showed that from 11:00 PM until 7:00 AM, there were four nurses and four CNAs clocked in.Review of the facility policy and procedure titled Nursing Services and Sufficient Staff reviewed on 7/15/2025 read, Policy: It is the policy of this facility to provide sufficient staff with appropriate competencies and skill sets to assure resident safety and attain or maintain the highest practicable physical, mental and psychosocial well-being or each resident. The facility's census, acuity, and diagnoses of the resident population will be considered based on the facility assessment. Policy Explanation and Compliance Guidelines: 2. Except when waived, the facility must designate a licensed nurse to serve as a charge nurse on each tour of duty. 5. Providing care includes, but is not limited to, assessing, evaluating, planning and implementing resident care plans and responding to resident's needs.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	105664	A. Building B. Wing	06/30/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Gainesville Health and Rehabilitation	4000 SW 20th Ave Gainesville, FL 32607

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

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0867 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action. Based on interview and record review, the facility failed to develop and implement a performance improvement plan upon identification of concerns related to staffing. Cross reference to F725:Findings include:Review of the facility's Quality Assurance and Performance Improvement (QAPI) agenda dated 6/10/2026 at 11:00 AM read, Updates of all outstanding items from last QAPI Meeting. Approval-Administrator. Review of survey citations/POC [plan of correction]. Current PIPS [performance improvement plans]. Kitchens PIPS. Staffing concerns. New issues/New opportunities. Closing.During an interview on 6/29/2026 at 12:03 PM, the Director of Nursing stated, Staffing has been discussed in QAPI [meeting], but we have no current PIPS for staffing. I was told it shouldn't be a problem with remote staffing because [name of another facility] is using the same staffing program. All department heads and [Medical Director's name] come to QAPI.During an interview on 6/29/2026 at 1:34 PM, the Administrator stated, [Medical Director's name] owns the building. He comes to the QAPI meetings. He is aware of the staffing issues. I know it has been short. It has been this way for maybe a month. The call outs and no shows got worse after the delayed paychecks. That is when we started having no call no shows. There were two weekends in this month that were short.An interview was attempted via phone call with the Medical Director/Owner on 6/29/2026 at 2:42 PM. No answer was received and the voicemail box was full.During an interview on 6/29/2026 at 2:50 PM, the Director of Nursing stated, Low staffing levels were brought to QAPI. We haven't started a PIP on it because the owner said we don't have any issues with that.During an interview on 6/29/2026 at 3:38 PM, Staff I, Licensed Practical Nurse (LPN), stated, I go to the QAPI meetings the first Wednesday of the month. We discussed staffing issues. [the Administrator's name] read off the 5-star report and talked about needing to do better. The QAPI before last, staffing issues came up, and people were tired and we were told by [the Medical Director's name] that we need to find our own solutions, and we were going to have to figure it out.An interview was attempted via phone call with the Medical Director/Owner on 6/30/2026 at 4:00 PM. No answer was received and the voicemail box was full.During an interview on 6/30/2026 at 4:36 PM, the Administrator stated, In May, we discussed using [name of remote staffing agency] in QAPI. In June QAPI, we discussed staff call outs and discussed corrective actions for no call no shows. We also put an advert on [job listing website's name] to hire CNAs [certified nursing assistants] and nurses. I feel it has been effective. There was definitely a problem with staffing. We knew there was a problem. A PIP should have been made for staffing.During an interview on 6/30/2026 at 4:37 PM, the Director of Nursing stated, We talked about issues with no shows and staffing issues in QAPI. We have weekly [name of communications platform] meetings with the schedulers. They put people on the schedule, and we make the assignments. We did not do a PIP for staffing. We didn't make a PIP because the owner said we did not have an issue with staffing.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	105664	A. Building B. Wing	06/30/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Gainesville Health and Rehabilitation	4000 SW 20th Ave Gainesville, FL 32607

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

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Make sure there is a pest control program to prevent/deal with mice, insects, or other pests. Based on observation, interview and record review, the facility failed to maintain an effective pest control program in 3 of 3 units reviewed.Findings include:During an interview on 6/28/2026 at 7:18 AM, Staff C, Certified Nursing Assistant (CNA), stated, I have seen a few roaches and gnats, we usually just kill them.During an observation on 6/28/2026 at 8:10 AM, there were three black flying insects in the main dining room (Photographic evidence obtained).During an interview on 6/28/2026 at 9:05 AM, Resident #6 stated, I have seen a lot of gnats and roaches everywhere. I have seen flies in my room and in the hallway. I told the staff about it. They put up some sticky tape, but I still see bugs.During an observation on 6/28/2026 at 9:30 AM in Resident #2's room, there was a black flying insect flying around Resident #2's head and the breakfast tray. Resident #2 swatted at the insect.During an interview on 6/28/2026 at 9:30 AM, Resident #2 stated, They have a bug problem here. Roaches, gnats, and flies. I have seen roaches in my room every night.During an observation on 6/28/2026 at 9:46 AM in Resident #3's room, there was an oblong brown insect, approximately 1 inch long, moving quickly from under the bedside dresser to underneath the bed.During an interview on 6/28/2026 at 9:46 AM, Resident #3 stated, There are roaches and bugs all over this place. I see roaches all of the time, even during the day.During an observation on 6/28/2026 at 11:35 AM, there were four fly traps in the conference room (Photographic evidence obtained).During an interview on 6/28/2026 at 12:00 PM, the Maintenance Director stated, Pest control was just here this past Friday.During an interview on 6/28/2026 at 12:48 PM, Staff E, CNA, stated, There have been gnats, roaches, and flies.Review of the pest control logs provided by the Administrator showed pest control visited the facility on 6/26/2026 and administered a treatment for roaches.Review of the facility policy and procedure titled Safe and Homelike Environment reviewed on 7/15/2025 read, Policy: In accordance with residents' rights, the facility will provide a safe, clean, comfortable and homelike environment, allowing the resident to use his or her personal belongings to the extent possible. 3. Housekeeping and maintenance services will be provided as necessary to maintain a sanitary, orderly, and comfortable environment.