

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

PRINTED: 04/15/2025
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 105193	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 03/29/2025
NAME OF PROVIDER OR SUPPLIER PARK MEADOWS HEALTHCARE & REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 3250 SW 41ST PLACE GAINESVILLE, FL 32608		
(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	
F 000	INITIAL COMMENTS	F 000			
F 584	<p>Safe/Clean/Comfortable/Homelike Environment CFR(s): 483.10(i)(1)-(7)</p> <p>§483.10(i) Safe Environment. The resident has a right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>The facility must provide- §483.10(i)(1) A safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible. (i) This includes ensuring that the resident can receive care and services safely and that the physical layout of the facility maximizes resident independence and does not pose a safety risk. (ii) The facility shall exercise reasonable care for the protection of the resident's property from loss or theft.</p> <p>§483.10(i)(2) Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior;</p> <p>§483.10(i)(3) Clean bed and bath linens that are in good condition;</p>	F 584			

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

TITLE

(X6) DATE

Electronically Signed

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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F 584	<p>Continued From page 1</p> <p>§483.10(i)(4) Private closet space in each resident room, as specified in §483.90 (e)(2)(iv);</p> <p>§483.10(i)(5) Adequate and comfortable lighting levels in all areas;</p> <p>§483.10(i)(6) Comfortable and safe temperature levels. Facilities initially certified after October 1, 1990 must maintain a temperature range of 71 to 81°F; and</p> <p>§483.10(i)(7) For the maintenance of comfortable sound levels.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observations and interviews, the facility failed to ensure an orderly and sanitary environment in 4 (100, 200, 300, 400) of 4 hallways.</p> <p>Findings include:</p> <p>During a tour of the facility on 3/29/25 at 9:17 AM, a buildup of trash and debris was observed on all hallways [100, 200, 300 and 400]. No housekeeping carts were observed during the tour.</p> <p>During a tour of the facility on 3/29/25 at 9:20 AM, in the 100 hallway, close to the exit leading to the smoking patio, there was significant debris observed on the floor, which consisted primarily of leaves, grass, and some small pieces of trash.</p> <p>An interview on 3/29/25 at 10:00 AM, Resident #6 stated that he does not see housekeeping very often.</p> <p>An interview on 3/29/25 at 10:10 AM, Resident #7</p>	F 584			

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F 584	<p>Continued From page 2</p> <p>stated that housekeeping could be better.</p> <p>An interview on 3/29/25 at 10:17 AM, Resident #8 stated housekeeping was a 'joke.'</p> <p>During a tour of the facility on 3/29/25 at 11:30 AM, debris and trash was still observed on the floors of 100, 200, 300, and 400 hallways. No housekeeping carts were observed during the tour.</p> <p>During an observation of the facility on 3/29/25 at 1:20 PM with the Administrator, trash and debris were observed on all hallways (100, 200, 300 and 400) throughout the facility. A large, uncovered cart was being brought out of the dirty utility room that was filled with bags of soiled linens and trash creating a lingering and foul odor. On the 100 hallway there was a brownish dried liquid on the wall from the handrail to the floor in two distinct wavy lines that were approximately 1/8" to 1/4" width in size. No housekeeping carts were observed during the tour with the Administrator. The Administrator confirmed the unclean and unsanitary environment.</p> <p>An interview on 3/29/25 at 1:30 PM, the Administrator stated that housekeeping follow a check list that they are supposed to turn in showing those rooms and common areas that were cleaned. The Administrator stated that his expectation was to follow checklist and that the daily cleaning schedule was not being followed. He verified there was no housekeeping personnel working the morning of 3/29/25.</p>	F 584		