STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALC000350	A. BUILDING B. WING	09/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PRUITTPLACE - BUCKHEAD	3088 LENOX ROAD ATLANTA, GA 30324

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)
{0000}	Initial Comments. The purpose of this visit was to investigate intake #GA50005429. An onsite visit was made 9/18/25 and the inspection was completed 9/19/25.
{1300} SS= D	111-8-63-.13(1) Community Safety Precautions. The interior and exterior of the assisted living community must be kept clean, in good repair and maintained free of unsanitary or unsafe conditions which might pose a health or safety risk to the residents and staff. This REQUIREMENT is not met as evidenced by: Based on observation and interview, the facility failed to keep the interior of the facility clean and in good repair for 1 of 3 sampled residents (Resident #1). Findings included: During a tour of the facility, the apartment of Resident #1 the carpet was observed dirty with black and dark brown stains throughout. The bathroom ceiling was observed with a open square hole approximately 11 inches X 11 inches. Stains were observed on the ceiling above the sink in the kitchen area of the resident's apartment.

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	During an interview on 9/18/25 at 12:48 p.m., Resident #1 stated he/she had been asking for his/her carpet to be cleaned. During a tour on 9/18/25 at 1:38 p.m., Staff F stated the black wheels on the wheelchair of Resident #1 caused the dirty carpet. Staff F also stated residents had to be out of the room for 3 hours to allow the carpet to dry thoroughly. Staff F further stated the carpet in the room of Resident #1 was to be cleaned.
{2501} SS= D	111-8-63-.25(1)(a) Supporting Residents' Rights. The assisted living community must provide to each resident care and services which are adequate, appropriate, and in compliance with state law and regulations. This REQUIREMENT is not met as evidenced by: Based on observation, record review, and interviews, the facility failed to provide services that were adequate, appropriate, and in compliance with state regulations to 1 of 3 sampled residents (Resident #1). Findings included: During a tour of the facility, Resident #1 was observed sitting in a wheelchair in his/her apartment. Staff E was not observed.

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A review of the physician's medical evaluation for Resident #1, dated 9/16/21, showed the resident required toileting and repositioning by staff throughout the night.

A review of the care plan for Resident #1, dated 6/16/25, showed the resident required the physical assistance of 2 staff for toileting. The care plan also showed, for mobility and transferring, the resident required the physical assistance of 1 staff person. The care plan showed staff were required to wash, dry, fold, hang on hangers, and place in the closet the resident’s laundry once weekly. The care plan further showed the laundry was to be completed to ensure that Resident #1 had clean clothes available.

A review of the call log for Resident #1, dated 9/17/25, showed that at 10:42 a.m. and 3:18 p.m., the pendant response was 4 hours and 35 minutes. The call Log also showed at 7:37 p.m., pendant response was 1 hour and 17 minutes. The call log dated 9/17/25 further showed at 9:23 p.m., pendant response to Resident #1 was 1 hour and 17 minutes.

During an interview on 9/18/25 at 12:48 p.m., Resident #1 stated that for 5 mornings, Staff E would not assist him/her with activities of daily living. The resident stated Staff E just left him/her and complained about the possibility of hurting the back of Staff E. Resident #1 also stated he/she would have to wait a long time for assistance and Staff E would tell him/her to stand up before Staff E would help him/her. The resident stated that Staff E knew he/she could not stand unassisted. Resident #1 stated Staff E would put dirty clothes on him/her. Resident #1 further stated AA would come from home to clean his/her teeth and get him/her ready and assist him/her to bed.

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	During an interview on 9/18/25 at 1:40 p.m., AA stated the staff has gone into the dirty clothes basket and retrieved dirty, wet clothes for Resident #1 to wear to bed. AA also stated sometimes Resident #1 was in the same wet, dirty clothes. AA further stated treatment had improved a little since he/she had a talk with Staff E. During an interview on 9/19/25 at 9:02 a.m., Staff E stated he/she had not provided services to Resident #1 in 2 or 3 weeks. During an interview on 9/19/25 at 3:55 p.m., Staff B stated the facility would do better.