Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11968124	A. BUILDING: _____ B. WING _____	05/06/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TWO SISTERS TENDER CARE LLC	4521 NW 6 ST MIAMI, FL 33126

(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) COMPLETE DATE
A 000	Initial Comments An COVID-19 control visit was conducted at Two Sisters Tender Care, LLC on and concluded on . Deficiencies were identified at the time of the visit.	A 000		
A 030 SS=G	59A-36.007(6) FAC; 429.28( ) FS 429.27 Resident Care - Rights & Facility Procedures 59A-36.007 (6) RESIDENT RIGHTS AND FACILITY PROCEDURES. (a) A copy of the Resident Bill of Rights as described in section 429.28, F.S., or a summary provided by the Long-Term Care Ombudsman Program must be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to rule 59A-36.006, F.A.C. (b) In accordance with section 429.28, F.S., the facility must have a written grievance procedure for receiving and responding to resident complaints and a written procedure to allow residents to recommend changes to facility policies and procedures. The facility must be able to demonstrate that such procedure is implemented upon receipt of a complaint. (c) The telephone number for lodging complaints against a facility or facility staff must be posted in full view in a common area accessible to all residents. The telephone numbers are: the Long-Term Care Ombudsman Program, 1(888)831-0404; , Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida Hotline, 1(800)96- or 1(800)962-2873. The telephone numbers must be posted in close proximity to a telephone accessible by residents	A 030		

AHCA Form 3020-0001

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

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A 030	Continued From page 1 and the text must be a minimum of 14-point font. (d) The facility must have a written statement of its house rules and procedures that must be included in the admission package provided pursuant to rule 59A-36.006, F.A.C. The rules and procedures must at a minimum address the facility's policies regarding: 1. Resident responsibilities; 2. [illegible] and tobacco use; 3. Medication storage; 4. Resident elopement; 5. Reporting resident , neglect, and [illegible]; 6. Administrative and housekeeping schedules and requirements; 7. control, sanitation, and universal precautions; and, 8. The requirements for coordinating the delivery of services to residents by third party providers. (e) Residents may not be required to perform any work in the facility without compensation. Residents may be required to clean their own sleeping areas or apartments if the facility rules or the facility contract includes such a requirement. If a resident is employed by the facility, the resident must be compensated in compliance with state and federal wage laws. (f) The facility must provide residents with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication, pursuant to section 429.28(1)(d), F.S. The facility must allow unidentified telephone calls to residents. For facilities with a licensed capacity of 17 or more residents in which residents do not have private telephones, there must be, at a minimum, a readily accessible telephone on each floor of each building where residents reside. (g) In addition to the requirements of section	A 030		

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A 030	Continued From page 2 429.41(1)(k), F.S., the use of physical . . . . . by a facility on a resident must be reviewed by the resident's physician annually. Any device, including half-bed rails, which the resident chooses to use and can remove or avoid without assistance, is not considered a physical . 429.28 Resident bill of rights.- (1) No resident of a facility shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law, the Constitution of the State of Florida, or the Constitution of the United States as a resident of a facility. Every resident of a facility shall have the right to: (a) Live in a safe and decent living environment, free from and neglect. (b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy. (c) Retain and use his or her own clothes and other personal property in his or her immediate living quarters, so as to maintain individuality and personal dignity, except when the facility can demonstrate that such would be unsafe, impractical, or an infringement upon the rights of other residents. (d) Unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum. Upon request, the facility shall make provisions to extend visiting hours for caregivers and out-of-town guests, and in other similar situations. (e) Freedom to participate in and benefit from community services and activities and to pursue the highest possible level of independence, autonomy, and interaction within the community.	A 030		

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A 030	Continued From page 3	A 030		

(f) Manage his or her financial affairs unless the resident or, if applicable, the resident's representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as provided in s. 429.27.
(g) Share a room with his or her spouse if both are residents of the facility.
(h) Reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals except when prevented by inclement weather.
(i) Exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, nor any attendance at religious services, shall be imposed upon any resident.
(j) Assistance with obtaining access to adequate and appropriate health care. For purposes of this paragraph, the term "adequate and appropriate health care" means the management of medications, assistance in making , , for health care services, the provision of or arrangement of transportation to health care . , , ... , and the performance of health care services in accordance with s. 429.255 which are consistent with established and recognized standards within the community.
(k) At least 45 days' notice of relocation or termination of residency from the facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally . . , ... , the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for

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A 030	Continued From page 4 relocation shall be set forth in writing. In order for a facility to terminate the residency of an individual without notice as provided herein, the facility shall show good cause in a court of competent jurisdiction. (l) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without , interference, coercion, discrimination, or reprisal. Each facility shall establish a grievance procedure to facilitate the residents' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or special interest groups. (2) The administrator of a facility shall ensure that a written notice of the rights, , and prohibitions set forth in this part is posted in a prominent place in each facility and read or explained to residents who cannot read. The notice must include the statewide toll-free telephone number and e-mail address of the State Long-Term Care Ombudsman Program and the telephone number of the local ombudsman council, the Elder Hotline operated by the Department of Children and Families, and, if applicable, , Rights Florida, where complaints may be lodged. The notice must state that a complaint made to the Office of State Long-Term Care Ombudsman or a local long-term care ombudsman council, the names and identities of the residents involved in the complaint, and the identity of complainants are kept confidential pursuant to s. 400.0077 and that retaliatory action cannot be taken against a resident for presenting grievances or for exercising any other resident right. The facility must ensure a resident's access to a telephone to	A 030		

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A 030	Continued From page 5 call the State Long-Term Care Ombudsman Program or local ombudsman council, the Elder [illegible] Hotline operated by the Department of Children and Families, and [illegible], Rights Florida. 429.27 Property and personal affairs of residents.- (1)(a) A resident shall be given the option of using his or her own belongings, as space permits; choosing his or her roommate; and, whenever possible, unless the resident is adjudicated [illegible] or [illegible] under state law, managing his or her own affairs. (b) The admission of a resident to a facility and his or her presence therein shall not confer on the facility or its owner, administrator, employees, or representatives any authority to manage, use, or dispose of any property of the resident; nor shall such admission or presence confer on any of such persons any authority or responsibility for the personal affairs of the resident, except that which may be necessary for the safe management of the facility or for the safety of the resident. This Statute or Rule is not met as evidenced by: Based on observation, interview, and record review, the facility failed to safeguard residents' well-being by failing to follow current [illegible] control standards related to COVID-19 and Florida Governor's emergency orders DEM Order 20-006, dated [illegible], for 14 out of 14 sampled residents (Resident #1 through #14). Resident #3 tested positive for the COVID-19 [illegible] and staff that were exposed continued to work and care for residents, failing to self- [illegible] for the period recommended by the Centers for [illegible] Control. The facility	A 030		

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A 030	Continued From page 6 placed residents at risk of getting [illegible] by not ensuring residents practiced social distancing or wear mask or [illegible] coverings. The facility also failed to treat Residents # 2 and # 4 with consideration, respect, and due recognition of personal dignity, individuality, and the need for privacy. The residents were placed in the living room because the facility did not have a room for residents in need of isolation and [illegible]. Findings Included: On [illegible], the Governor of the State of Florida issued Executive Order 20-51 designating a Public Health Emergency as a result of COVID-19 and its impact. Pursuant to that authority, emergency orders have been issued by the Florida Division of Emergency Management to implement the protections necessary to assure the health, safety, and well-being of Florida's citizenry, including those most [illegible] to the effects of . The COVID-19 is a transmissible [illegible] that presents severe risk to persons who are aged, infirm, or suffer from co- including, but not limited to, [illegible] system deficiency, [illegible], and [illegible]. See generally, Publications of the Centers for Control. On during an onsite inspection of the facility, observation revealed 4 residents sitting in the living room less than 6 apart and not wearing masks or [illegible] coverings. Further observation showed 2 other residents sitting next to each other on a sofa less than 6 [illegible] apart and not wearing mask or coverings. Additionally, observed 4 residents, waiting for lunch to be served, sitting at the dining table less than 6	A 030		

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A 030	Continued From page 7 apart. According to the Centers for Control and Prevention (CDC), it was recommended for Assisted Living Facilities (ALF) to take the following actions: "Cancel all group activities. Instead of communal dining, consider delivering meals to rooms, creating a "grab n' go" option for residents, or staggering mealtimes to accommodate social distancing while dining (e.g., a single person per table)". On at 11:50 AM, observed two beds in # and observed Resident # 1 sitting on a chair. Staff B stated that Resident # 1 returned from the hospital on ; therefore, was and , in his room. She also said as a precaution, the roommate (Resident #2) was moved to the living room and slept on a cot, in order to have Resident #1 in the room alone to be , . On at 11:56 AM, observed two beds in # and observed Resident # 3 laying in the bed. Staff B then stated that the Department of Health (DOH) called yesterday and informed the facility that Resident # 3 tested positive for COVID - 19. She explained, as a precaution on , the roommate (Resident # 4) was moved to the living room and slept on a cot in order to have Resident #3 remain in the room for isolation. On at 12 PM, during a phone interview Staff A stated "The fire department came to the facility on and tested [Resident # 1, Resident # 3, and Resident # 14]. The DOH called yesterday and told us [Resident # 3] was positive and both [Resident # 1 and # 14] were negative. [Resident # 1] is and	A 030		

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A 030	Continued From page 8 , because he came from the hospital on Saturday. We and [Resident # 3], who is , as of last night when we found out that she was positive. Her roommate, [Resident # 4], has been sleeping on a cot in the living room since last night. I know I'm not supposed to do that, but it's for their health. My issue is that I don't have space to everyone". Staff A also explained DOH went to the facility on and tested everyone, including the staff, test results were pending On at 12 PM during a telephone interview Staff A stated Staff C was assigned to take care of Resident #3 who was positive for COVID-19. She stated Staff D was assigned to take care of the other residents and Staff B was the cook. On at approximately 12:15 PM Staff C stated she was on duty on and confirmed she was assigned to take care of Resident #3 who tested positive for COVID-19. Staff C and D stated they found out Resident #3 had tested positive for COVID-19 the night before and they were exposed but did not self- , On throughout the tour of the survey, Staff C and D were observed wearing surgical mask, shield and gloves. Staff B was observed wearing a N95 mask, but was not wearing a shield, gloves or a gown. On at 12:15 PM, Staff B stated that the residents all sat at the table to eat because they were all wearing masks. She did not explain why residents did not socially distance or sit 6 apart.	A 030		

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A 030	Continued From page 9 A review of 12 resident records showed that all residents were diagnosed with . . . health issues which, according to the CDC, placed them at greater risk for . . . . . the coronavirus. Class II	A 030		