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
	AL11964209	A. BUILDING: _____ B. WING _____	R 08/03/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARILUCA # 2	9362 SW 155 AVENUE MIAMI, FL 33196

(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 A revisit to a COVID-19 monitoring visit was conducted at Mariluca #2 on [redacted]. Deficiencies were identified at the time of visit.	{A 000}		
A 054 SS=D	59A-36.008(5) FAC Medication - Records (5) MEDICATION RECORDS. (a) For residents who use a pill organizer managed in subsection (2), the facility must keep either the original labeled medication container; or a medication listing with the prescription number, the name and address of the issuing pharmacy, the health care provider's name, the resident's name, the date dispensed, the name and strength of the drug, and the directions for use. (b) The facility must maintain a daily medication observation record for each resident who receives assistance with self-administration of medications or medication administration. A medication observation record must be immediately updated each time the medication is offered or administered and include: 1. The name of the resident and any known [redacted] the resident may have; 2. The name of the resident's health care provider and the health care provider's telephone number; 3. The name, strength, and directions for use of each medication; and, 4. A chart for recording each time the medication is taken, any missed dosages, refusals to take medication as prescribed, or medication errors. (c) For medications that serve as chemical [redacted], the facility must, pursuant to section 429.41, F.S., maintain a record of the prescribing physician's annual evaluation of the use of the medication.	A 054		

AHCA Form 3020-0001

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A 054	Continued From page 1 This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to update the medication observation record each time the medication is offered or administered for one out of six sampled residents (Resident #1). Findings Include: On [redacted] at 10:10 AM, observed a small medication cup unattended with multiple pills inside on top of the dining table next to Resident #1. Review of the Resident #1 medication observation record showed prescribed medications for 8:00 AM initialed as given. The signed medications signed as given were [redacted] BES 5 mg, [redacted] HBR 10 mg, [redacted] 20 mg, [redacted] 1 mg, and [redacted] 500 mg. On [redacted] at 10:10 AM, Staff B stated, " Resident #1 was sleeping, that's why I did not give her the medications earlier, but I always give them to her on time. I left them on the table for her to take and I signed the medication observation record, it was my mistake." Class III	A 054		
A 079 SS=I	59A-36.010(3) FAC Staffing Standards - Levels (3) STAFFING STANDARDS. (a) Minimum staffing: 1. Facilities must maintain the following minimum staff hours per week:	A 079		

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A 079	Continued From page 2 Number of Residents, Day Care Participants, and Respite Care Residents Staff Hours/Week 0-5 168 212 16-25 253 26-35 294 36-45 335 46-55 375 56-65 416 66-75 457 76-85 498 86-95 539 For every 20 total combined residents, day care participants, and respite care residents over 95 add 42 staff hours per week. 2. Independent living residents, as referenced in subsection 59A-36.015(3), F.A.C., who occupy beds included within the licensed capacity of an assisted living facility but do not receive personal, limited nursing, or extended congregate care services, are not counted as residents for purposes of computing minimum staff hours. 3. At least one staff member who has access to facility and resident records in case of an emergency must be in the facility at all times when residents are in the facility. Residents serving as paid or volunteer staff may not be left solely in charge of other residents while the facility administrator, manager or other staff are absent from the facility. 4. In facilities with 17 or more residents, there must be at least one staff member awake at all hours of the day and night. 5. A staff member who has completed courses in First Aid and , , , ( ) and holds a currently valid card documenting completion of such courses must be in the facility at all times.	A 079		

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A 079	Continued From page 3 a. Documentation of attendance at First Aid or courses pursuant to subsection 59A-36.011(5), F.A.C., satisfies this requirement. b. A nurse is considered as having met the course requirements for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, part III, F.S., is considered as having met the course requirements for both First Aid and . 6. During periods of temporary absence of the administrator or manager of more than 48 hours when residents are on the premises, a staff member who is at least . . . must be physically present and designated in writing to be in charge of the facility. No staff member shall be in charge of a facility for a consecutive period of 21 days or more, or for a total of 60 days within a calendar year, without being an administrator or manager. 7. Staff whose duties are exclusively building or grounds maintenance, clerical, or food preparation do not count towards meeting the minimum staffing hours requirement. 8. The administrator or manager's time may be counted for the purpose of meeting the required staffing hours, provided the administrator or manager is actively involved in the day-to-day operation of the facility, including making decisions and providing supervision for all aspects of resident care, and is listed on the facility's staffing schedule. 9. Only on-the-job staff may be counted in meeting the minimum staffing hours. Vacant positions or absent staff may not be counted. (b) Notwithstanding the minimum staffing requirements specified in paragraph (a), all facilities, including those composed of apartments, must have enough qualified staff to provide resident supervision, and to provide or	A 079		

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A 079	Continued From page 4 arrange for resident services in accordance with the residents' scheduled and unscheduled service needs, resident contracts, and resident care standards as described in rule 59A-36.007, F.A.C. (c) The facility must maintain a written work schedule that reflects its 24-hour staffing pattern for a given time period. Upon request, the facility must make the daily work schedules of direct care staff available to residents or their representatives. (d) The facility must provide staff immediately when the agency determines that the requirements of paragraph (a) are not met. The facility must immediately increase staff above the minimum levels established in paragraph (a), if the agency determines that adequate supervision and care are not being provided to residents, resident care standards described in rule 59A-36.007, F.A.C., are not being met, or that the facility is failing to meet the terms of residents' contracts. The agency will consult with the facility administrator and residents regarding any determination that additional staff is required. Based on the recommendations of the local fire safety authority, the agency may require additional staff when the facility fails to meet the fire safety standards described in rule chapter 69A-40, F.A.C., until such time as the local fire safety authority informs the agency that fire safety requirements are being met. 1. When additional staff is required above the minimum, the agency will require the submission of a corrective action plan within the time specified in the notification indicating how the increased staffing is to be achieved to meet resident service needs. The plan will be reviewed by the agency to determine if it sufficiently increases the staffing levels to meet resident	A 079		

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A 079	Continued From page 5 needs. 2. When the facility can demonstrate to the agency that resident needs are being met, or that resident needs can be met without increased staffing, the agency may modify staffing requirements for the facility and the facility will no longer be required to maintain a plan with the agency. (e) Facilities that are co-located with a nursing home may use shared staffing provided that staff hours are only counted once for the purpose of meeting either assisted living facility or nursing home minimum staffing ratios. (f) Facilities holding a limited mental health, extended congregate care, or limited nursing services license must also comply with the staffing requirements of rules 59A-36.020, 59A-36.021 or 59A-36.022, F.A.C., respectively. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to have enough qualified staff to provide supervision, scheduled, and unscheduled service needs to seven residents. One staff member was on duty at the time of the visit. Findings included: On at 9:30 AM, observed Staff B working alone with seven residents. Review of the facility staff schedule dated showed Staff B, and Staff C were scheduled to work from 6:00 AM to 5:00 PM. On at 9:55 AM, Staff B stated, "Staff C went out, she is coming ; she went	A 079		

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A 079	Continued From page 6 to get some groceries." On [illegible] at 10:00 AM, during a telephone interview, the Administrator stated, "Staff C asked me for the day off because she needed to resolve some personal things, but the hospice assistant is there 3 hours daily to assist the residents." Class III	A 079		

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CZ828	408.813(3) FS Administrative Fines; Violations 408.813 Administrative fines; violations.-As a penalty for any violation of this part, authorizing statutes, or applicable rules, the agency may impose an administrative fine. (3) The agency may impose an administrative fine for a violation that is not designated as a class I, class II, class III, or class violation. Unless otherwise specified by law, the amount of the fine may not exceed $500 for each violation. Unclassified violations include: (a) Violating any term or condition of a license. (b) Violating any provision of this part, authorizing statutes, or applicable rules. (c) Exceeding licensed capacity. (d) Providing services beyond the scope of the license. (e) Violating a moratorium imposed pursuant to s. 408.814. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview the facility exceeded its licensure capacity of 6 beds. Seven residents were found to be living at the facility. Findings included: On at 9:30 AM, upon arrival, Staff B stated there were six residents and one daycare resident at the facility. The daycare resident was observed sitting in the Florida Room. On at 9:30 AM Staff B (caretaker) stated the daycare Resident daughter would drop her off daily from 7 AM to 6 PM. Review of the daycare participant's record	CZ828		

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CZ828	Continued From page 1	CZ828		

showed a contract signed for a fee of $1700 per month. Review of the contract dated revealed resident to have personal services, such as three nutritious meals per day, safe comfortable and sanitary quarters, housekeeping services, cleaning of resident's room, and provisions of all linens, towels, soap and toilet paper and assistance with self-administration of medications. The contract also included additional services of personal supervision, provision of social and leisure activities, arrangement for health care and assistance with activities of daily living.

Review of Resident #1 the 1823 health assessment dated showed diagnoses of , , , memory loss. The resident had universal precautions. The resident had no elopement risks. The resident needed supervision with all activities of daily living, and had a regular diet.

On at 10:25 AM, during a telephone interview with the daycare participant family member, he stated, " The Resident has been living at the facility since 2018. We are very happy with the facility and their care. We go and visit every week."

On at 10:30 AM, during a second interview, Staff B stated, "she (Resident #1) is staying with us. Her daughter is traveling."

Review of the facility license showed the facility was license for 6 beds.

Unclassified