| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | AL11967275 | 05/14/2014 |
| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE | |
| Nomel's Alf Inc | 3818 Jupiter Blvd Se Palm Bay, FL 32909 | |
| SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION) | | |

**Revisit Corrected Tags:**
0030-Resident Care - Rights & Facility Procedures
0052-Medication - Assistance With
0055-Medication - Storage And Disposal-C
0078-Staffing Standards - Staff-05
0081-Training - Staff
0084-Training - Assis Self-Admin Meds & Med Mgmt-05
0093-Food Service - Dietary Standards-
0161-Records - Staff-05

**Revisit Repeat Tags:**
0000-Initial Comments-
0008-Admissions - Health Assessment-58a-5.0181(2) Fac
0025-Resident Care - Supervision-58a-5.0182(1) Fac
0162-Records - Resident-58a-5.024(3) Fac
0167-Resident Contracts-58a-5.025(1) Fac

**Revisit New Tags:**
0010-Admissions - Continued Residency-58a-5.0181(4) Fac

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**Specific Tag Findings:**

0000-Initial Comments
The revisit was conducted on Nomel's Assisted Living had deficiencies found during the visit.

0008-Admissions - Health Assessment 58A-5.0181(2) FAC

DEFICIENCY REMAINED UNCORRECTED

Based on interview and record review the facility failed to ensure the health assessment contained all required information for 1 of 2 sampled residents (#1 and #3).

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Findings:

1. Resident record review at approximately 10 AM for resident #1 revealed a health assessment report dated [redacted] that listed diagnoses of [redacted] and high [redacted] Continued review of the assessment revealed it was incomplete; it did not address the resident's needs regarding self-administration of medications and dietary needs.

2. Resident record review for resident #3 revealed a health assessment report dated [redacted] that listed diagnoses of right hip pain and degenerative disk [redacted] The assessment did not indicate the resident's dietary needs.

In a telephone interview with the administrator on [redacted] at approximately 10:30 AM she stated she was not able to take resident #1 to the doctor.

Class III

0010-Admissions - Continued Residency 58A-5.0181(4) FAC
Based on interviews and record review the facility failed to ensure that as part of the continued residency 1 of 3 sampled residents (#1) had a face to face medical examination by a licensed health care provider after a significant change. A significant change is defined in Rule 58A-5.0131, F.A.C.

Findings:

During the facility tour on [redacted] at approximately 9 AM, staff A stated resident #1 was now under the care of hospice.

Resident record review at approximately 10 AM for resident #1 revealed a health assessment report dated [redacted] that listed diagnoses of [redacted] and high [redacted] Continued review that included the hospice record, revealed she was admitted to their service on [redacted] because of [redacted]

In a telephone interview with the administrator on [redacted] at approximately 10:30 AM, she stated she was not able to take resident #1 to the doctor.

Class III

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0025-Resident Care - Supervision 58A-5.0182(1) FAC

DEFICIENCY REMAINED UNCORRECTED

Based on interview and record review the facility failed to maintain a written record, updated as needed, of any significant changes as defined in subsection 58A-5.013 for 2 of 3 sampled residents (1 & 3).

Findings:

During the facility tour on [redacted] at approximately 9 AM, staff A stated resident #1 was now under the care of hospice and resident #3 was at a rehabilitation facility after she had her hip replaced.

1. Resident record review at approximately 10AM for resident #1 revealed a health assessment report dated [redacted] that listed diagnoses of [redacted] and high [redacted] Continued review revealed no notations that indicated the changes that took place on the resident's state of health that required the services of hospice.

2. Resident record review for resident #3 revealed a health assessment report dated [redacted] that listed diagnoses of right hip pain and degenerative disk [redacted] Continued review revealed an evaluation request from a doctor to another doctor requesting a complete a [redacted] medical evaluation. The copy was blank and did not indicate the type of procedure and the date the procedure was to be done.

In an interview on [redacted] at approximately 4 PM, the administrator stated there were no notes maintained. She asked what types of notations were needed.

Class III

0162-Records - Resident 58A-5.024(3) FAC

DEFICIENCY REMAINED UNCORRECTED

Based on interview and record review the facility failed to ensure that weight records were maintained for 1 of 3 sampled residents (#1) who received assistance with the activities of

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daily living; and failed to ensure 1 of 2 sampled residents (#1) a copy of the written informed consent described in Rule 58A-5.0181, F.A.C., if not included in the resident's contract.

Findings:

Resident record review for resident #1, at approximately 10 AM revealed she was admitted to the facility on . Continued review revealed a health assessment dated that indicated she needed ambulation, bathing, dressing, and transfers. The weights recorded were on , she was 124 pounds and on she was 120 pounds. There were no other weight records available to review. A weight record was due on . Continued review revealed an informed consent regarding assistance of medications from unlicensed staff was dated ; however it was incomplete and did not stated weather or not the staff who assisted with the medications, would or not be supervised by a nurse.

In a telephone interview with the administrator on at approximately 10:30 AM PM, she stated the weights and the consent form had not been done.

Class III

0167-Resident Contracts 58A-5.025(1) FAC

DEFICIENCY REMAINED UNCORRECTED

Based on resident record review and interview the facility failed to ensure that the resident contracts for 2 of 3 sampled resident records (#2 and #3) contained all the necessary requirements.

Findings:

Individual resident record review for residents #2 and #3 on at approximately 10 AM revealed that the contracts did not include a statement to inform the residents or responsible party that as part of the continued residency criteria, a resident must have a face-to-face medical examination by a licensed health care provider at least every 3 years after the initial assessment, or after a significant change, whichever came first.

In an telephone interview with the administrator on at approximately 10:30 AM, she

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stated contracts had not been done.

Class . .

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Nomel's Alf Inc
3818 Jupiter Blvd SE
Palm Bay, FL 32909

Dear Administrator:

This letter reports the findings of a revisit survey conducted on , 2014by representative(s) of this office. Enclosed is the provider's copy of the Statement of Deficiencies (State Form 5000-3547), which references the uncorrected deficiencies and/or new deficiencies identified during the revisit.

**All deficiencies shall be corrected no later than , 2014.**

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call this office at (407) 420-2502.

Sincerely,

Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure

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2727 Mahan Drive
Tallahassee, FL 32308
http://ahca.myflorida.com

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Phone (407) 420-2502; Fax (407) 245-0998