STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11942965	08/07/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Lighthouse Inn South (the)	3305 Se 5th Street Pompano Beach, FL 33062	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0000 - - Initial Comments
St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D
St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0083 - 58a-5.0191(4) Fac - Training - First Aid And S-S= D
St - A - 0084 - 58a-5.0191(5) Fac - Training - Assis Self-Admin Meds & Med Mgmt S-S= D
St - A - 0090 - 58a-5.0191(11) Fac - Training - S-S= D
St - A - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards S-S= D
St - A - 0161 - 58a-5.024(2) Fac - Records - Staff S-S= D

Specific Tag Findings:

0000-Initial Comments

An unannounced Chow of Ownership (CHOW) survey was conducted on at The Lighthouse Inn South. The facility had deficiencies found at the time of the visit.

0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC
Based on observation, record review and interviews, the facility failed to ensure that proper procedures were followed for assisting with self-administration of medication, for 5 out of 5 residents (Residents #2, #9, #10, #11 and #12) observed during medication pass.

The Findings Include:

1. During observation of medication pass on beginning at 12:03 PM, Staff A (Med Tech) gave medications to Resident #2, #9, #10, #11 and #12 without stating the names of their medications.

Staff A took the bubble packet of medication to the dining where Resident #9 was seated. Staff A popped the pill out of the packet into the resident's hand. She stated, "Hi (first name), here's your medication." Staff A did not state the name of the medication which was 50 mg.

Staff A did not state the names of the medications given to any of the aforementioned residents.

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At 12:16 PM, Staff A went to Resident #12's . . . . . dispense her medication. She stated, ... (first name), here's your medication." Resident #12 asked, "Is this one for my Parkinson's?" Staff A stated, 'yes.' Resident #12 looked at surveyor and stated, "I always ask." Staff A did not state what the name of the medication which was . . 25-100 mg.

2. In an observation made on . . . . at 12:09 PM, Staff A popped the pill from the bubble packet into Resident #11's hand and stated, "Hi (first name) here's your medication." Resident #11 put her hand up and said, "Wait." Staff A stated to this writer that the resident takes her time taking the medication. Two minutes later, Staff A asked Resident #11 if she wanted to try taking her medication again. Resident #11 put her hand up again and said, "Wait." Another two minutes passed when Staff A stated, "You don't want to take your medication?" The resident shook her head 'no.' She handed Staff A the pill. Staff A documented appropriately on the back of the resident's Medication Observation Record (MOR) that she refused the medication. Staff A stated she would let the supervisor know that the resident refused her . . . . dosage. Staff A threw the pill in a garbage can with no lid next to the medication cart that was accessible to residents.

Class III

0078-Staffing Standards - Staff 58A-5.019(2) FAC

Based on record review and interview, the facility failed to ensure that 2 out of 4 sampled employees (Staff B and D) had a written statement from a health care provider indicating that the employee does not have any signs or symptoms of communicable . including . . . .

The Findings Include:

A personnel record review conducted on . . . . revealed no documentation of a . . test completed for Staff B (hire date . and D (hire date . . who provide direct care to residents.

In an interview conducted on . . . . . at 2:57 PM, the Administrator (Staff D) acknowledged the findings for Staff B. The Administrator stated she had a . . test completed on . . . However, the results were not yet available. As of the date of the survey, the facility failed to provide documentation of the test.

Class III

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0081-Training - Staff In-Service 58A-5.0191(2) FAC

Based on record review and interviews, the facility failed to ensure that 2 out of 3 staff members (Staff A and C) had completed all required training.

The Findings Include:

Personnel record review conducted on revealed Staff A (hire date and Staff C (hire date did not have Elopement Response training within 30 days of employment. During numerous observations on revealed both staff members provide direct care to residents.

In an interview on at 2:57 PM, the Administrator acknowledged the findings. She stated no further documentation was available for review.

Class III

0083-Training - First Aid and 58A-5.0191(4) FAC

Based on record review and interviews, the facility failed to ensure that 3 out of 3 staff members had completed First Aid training and that a staff member who has the training is in the facility at all times.

The Findings Include:

A record review of the facility's personnel files conducted on revealed the following:

1. Staff A had a First Aid card that expired

2. Staff B and C had no documentation of completion of First Aid training.

During numerous observations made on revealed all three staff members provide direct care to residents.

A review of the staffing schedule for through indicated Staff B worked on from

2:00 PM to 8:30 PM. Further review indicated Staff B worked by herself from 8:00 PM to 8:30 PM. The staffing schedule indicated Staff C worked 8:00 PM to 7:00 AM on and . The schedule indicated Staff C worked by herself from 8:30 PM to 11:00 PM on these dates.

In an interview with the supervisor on at approximately 3:10 PM, this writer asked if any other staff members on their shifts had First Aid training. The supervisor stated she would check. By completion of the survey, no further information was provided indicating at least one staff member was present in the facility at all times that had completed First Aid training.

Class III

0084-Training - Assis Self-Admin Meds & Med Mgmt 58A-5.0191(5) FAC
Based on record review and interview, the facility failed to ensure that 1 out of 3 employees (Staff C), who assist residents with self-administration of medication had received the required 2 hour annual continuing education regarding medication assistance.

The Findings Include:

Personnel record review conducted on revealed that Staff C (Hire date completed a 4-hour initial training on regarding assistance with self-administration of medication. Further review indicated Staff C did not have the 2 hour annual training on the aforementioned topic.

In an interview conducted on at 11:01, Staff C stated she is a Home Health Aide (HHA) who assists residents with medications. Review of the Medication Observation Records (MORs) confirmed that Staff C, assists residents in the facility with their self-administered medications.

The Administrator acknowledged the findings on at 2:57 PM. She stated she had no further documentation available for review.

Class III

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0090-Training - [redacted] **58A-5.0191(11) FAC**

Based on record review and interviews, the facility failed to ensure that 2 out of 3 staff members (Staff A and C) had completed the required [redacted] training within 30 days of employment.

The Findings Include:

A record review of the facility's personnel files conducted on [redacted] revealed that Staff A (hire date [redacted] and Staff C (hire date [redacted] did not have [redacted] training within 30 days of employment.

During numerous observations conducted on [redacted] revealed both staff members provided direct care to residents.

The Administrator stated on [redacted] at 2:57 PM, that the training was completed. However, she acknowledged no certificates were available for review. Therefore, it was unable to be determined that aforementioned staff had completed [redacted] training, as required.

Class III

0093-Food Service - Dietary Standards 58A-5.020(2) FAC

Based on interviews and record review, the facility failed to ensure that menus were followed and substitutions were made of equal nutritive value for 24 out of 24 residents.

The Findings Include:

1. Resident interviews conducted on [redacted] revealed the following:

a. Resident #3 stated at 10:17 AM that the menu advertises baked beans with hotdogs. He stated 50 percent of the time, chips are substituted for the baked beans. Resident #3 added he would like the baked beans. He added that the facility substitutes food when it is convenient for them.

b. Resident #4 stated at 11:15 AM that there is not enough variety of foods served. She stated that potato chips are substituted for baked beans. Resident #4 stated, "They seem to veer off the menu and

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not serve what they are supposed to."

c. Resident #13 stated at 2:00 PM, that the menu has too many substitutions. He stated on days hot dogs are served with baked beans, the residents get potato chips instead. Resident #13 added, "Other days, we don't get what's on the menu either."

2. Record review of the substitution log from through indicated 15 substitutions were made. The reason for substitutions 9 out of 15 times was noted as not having the item available. For example, on chicken was substituted with basked fish and the reason noted was, "I don't have chicken." On jello was substituted by fruit (type of fruit was not indicated). The reason for substitution read, "I don't have jello." On fish was substituted with ravioli. The reason for substitution read, "I don't have fish."

Review of the ingredients revealed the following. Baked beans are not of equal nutritive value to potato chips. One cup of baked beans equals 20% of the Recommended Daily Intake (RDI). One cup of potatoes chips equals 7% of one's RDI. One cup of baked beans contains 56% , 29% fat, and 15% protein. One cup of potatoes chips contains 35% 60% fat, and 5% protein.

3. Staff interviews conducted on revealed the following:

a. The chef on duty stated at 1:53 PM that she sometimes substitutes on the menu if she does not have the item listed available. She stated approximately once a week the truck does not come and deliver what is needed; therefore, she make substitutions.

b. The Administrator stated at 3:25 PM that the chefs are to let the Regional Director of Food and Beverage know if they make any substitutions. She stated the Regional Director calls the chefs once a week to go over the menu and ensure they have the inventory needed so he knows what to purchase.

c. The Regional Director of Food and Beverage stated at 3:33 PM, that the chefs substitute items because they do not want to look and see where the food item is. He stated he places his orders by 5:00 PM on Tuesdays for the next week in order to have a 2-week supply of food on-hand. He added that the trucks always deliver on time. He stated that one of the chefs completes an inventory sheet which she reviews with him once a week. He stated every week the chef gives him the same inventory. The Regional Director stated, "I think she is not taking it accurately."

The Regional Director stated that the facility used an entire case of chips in one week whereas they typically last two weeks. He stated, "I'm guessing they (chefs) are reaching for the chips because it's easier than the baked beans. He stated the upcoming inventory would be reviewed on-site with the chef

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to ensure accuracy.

Class III

0161-Records - Staff 58A-5.024(2) FAC

Based on record review and interviews, the facility failed to ensure that documentation of compliance for all staff training hours was completed for 3 out of 3 employees (Staff A, B, and C).

The Findings Include:

Personnel record review conducted on revealed the following training certificates with no hours listed :

1. Emergency Preparedness and Evaluation training
a. Staff A (hire date certificate dated
b. Staff C (hire date , certificate dated

2. Incident Report training
a. Staff C, certificate dated

3. Resident Rights training
a. Staff A, certificate dated
b. Staff B (hire dated certificated dated

4. Regionalizing Neglect, and training
a. Staff A, certificate dated
b. Staff C, certificate dated

In an interview with the Administrator on at 2:57 PM, she acknowledged the hours were missing on the certificates.

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RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

2014

Administrator
The Lighthouse Inn South
3305 SE 5th Street
Pompano Beach, FL 33062

RE: Change of Ownership Survey

Dear Administrator:

This letter reports the findings of a Change of Ownership survey that was conducted on 7, 2014 by a representative of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

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 representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD
Enclosure

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