STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965505	**01/24/2017**
NAME OF PROVIDER OR SUPPLIER **SUN COAST RESIDENTIAL CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **813 SW 9TH STREET** **HALLANDALE BEACH, FL 33009**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

An unannounced relicensure survey was conducted on at Sun Coast Residential Care, (license #9856).
The facility had deficiencies identified at the time of the survey.

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on record review and interview, the facility failed to ensure a resident's Health Assessment was updated every 3 years and/or upon significant health changes, for 1 out 2 sampled resident records reviewed (Resident #1).

The findings included:

Review of Resident #1's Health Assessment AHCA Form 1823 dated revealed it was not current.
Review of the file revealed no other health assessments or documentation indicating a new Health Assessment was completed for Resident #1.
During an interview on at 8:52 PM, Resident #1 stated , he had a check-up a couple months ago. He denied being told that he needed a new health assessment form completed.
During an interview with the Administrator on 10:00 AM, he confirmed that the AHCA Form 1823 dated is the last health assessment available for Resident #1. He stated, " We will have to get one completed for him".

Class III

0051 - Medication - Pill Organizers - 58A-5.0185(2) FAC

Based on observation and interview, the facility failed to ensure medications were prepared by appropriate persons for 1 (Resident #1) of 1 residents utilizing a pill organizer. This could lead to the possiblity of medication errors, causing harm to residents as medications are no longer contained, labeled with the name, dosage and time the medication is due.

The findings included:

Observation of medication assistance on at 12:20 PM, the Administrator pulled out a pill organizer for Resident #1 with 4 rows each marked Monday through Friday. The medication was taken out of the pill organizer by hand by the Administrator and placed in a small cup and given to the resident .

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During an interview at the time of medication observation, the Administrator stated that he placed the medications in the pill organizer himself because it does not come packaged from pharmacy based on time. The Administrator says he did not know he could not fill the pill organizer and he will confered with the resident and his doctor about his medications.

Class III

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

Based on record review and interview, the facility failed to ensure evidence of a negative ( ) testing was documented, for 2 of 2 staff records reviewed and a communicable statement was completed for 1 (Staff B) of 2 staff records reviewed.

The findings included:

Record review on for the Administrator found that testing was on . No other testing documentation was found on file. Record review for Staff A, hired on found no communicable statement or testing documentation on file.

Interview with Administrator on at 1:15 PM, he confirms that the documentation is not available and there is no evidence that the testing was completed within the last year for himself or Staff A. He confirms he has no evidence that Staff A was assessed and found to be free from or other communicable .
Class III

0082 - Training - / - 58A-5.0191(3) FAC

Based on record review and interview, the facility failed to ensure facility employees completed an / (/) course within 30 days of employment.

The findings included:

Record review for Staff A on , documents a hire date of . Review of an orientation check-off sheet lists training completed by Staff B on . The list did not include the required / training.

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During an interview with the Administrator on at 1:15 PM, he confirmed that he did not give Staff A the / training and that he does not have any evidence that she ever completed the training.

Class

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

Based on record review and interview, the facility failed to ensure that at least one staff member who has completed First Aid holds and holds a currently valid card was present in the facility at all times.

The findings included:

Review of the staffing schedule for the week shows that the Administrator was on duty 24 hours a day and Staff A scheduled to come in for 1 hour in the evenings and for a couple hours on the weekends. Record review on for Staff A and Staff B failed to find documentation for First Aid Training.

During an interview on with the Administrator, he confirmed that the schedule is current and correct. He stated that he completed First Aid at the same time he updated his but cannot find the card. He confirmed that there is no documentation in either file that First Aid was completed in the last 2 years for Staff A or himself.

Class III

0091 - Training - Documentation & Monitoring - 58A-5.0191(12) FAC

Based on record review and interview, the facility failed to produce training documentation containing the appropriate information for 1 (Staff A) of 2 staff records reviewed.

The findings included:

Record review on for Staff A found a documented hire date of . Review of an orientation check-off sheet lists training completed by Staff B on . The check-off sheet failed to document the number of hours of the training, the training provider's name, dated signature and credentials.

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During an interview with the Administrator on at 1:15 PM, he stated he just used the check off list to document when Staff B completed the training. He confirmed that the information listed above was not documented on the check-off list. He stated that he will redo the form to include the missing information.

Class

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interview, the facility failed provide a safe living environment free of hazards in 1 of 3 observed and and posed the possibility of the spreading of in regards to the cleanliness of 2 of 3 observed.

The findings included:

During an initial tour of the facility, # located in the and used by Resident #2 was found to have the cover missing off the toilet tank. The malodorous and floor in the noted to be in need of cleaning. # located across from the and used by Resident #1 was found to have a hole in the lower wall behind the toilet. The shower had a large amount of dirt and /or black bio-growth covering the shower floor and lower wall. The Resident #1 had folded laundry / linens covering the second bed and a television on the floor next to the unused bed.

During a follow-up tour with the administrator at 1:00 PM, the above issues were pointed out. The Administrator said that the tank cover was recently broken and he planned to replace the entire toilet. He concluded he needed to clean the often due to the the Resident's status. He acknowledged that # used by Resident #1 needed a deep cleaning and said he did not know about the hole in the wall. He said he will put the linens back in the closet, remove the television from the floor and bring in someone to thoroughly clean the .

Class III

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Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on record review and interview, it was determined that the facility failed to ensure all direct care staff members were in compliance with the Level II background screening requirements , for 2 out of 2 staff members (Administrator and Staff A) .

The findings included:

Record review on for the Administrator found a BGS stating eligible as of 11/ , no other documentation was found. In review of the file for Staff A, no background screening documentation was found. Review of the Agency for Health Care Administration Background Screening website found that it stated " A New Screening is Required " for both the Administrator and Staff A.

During an interview with the Administrator at 12:45 PM, he stated he did not know he had to get a new background screening and he sent Staff A to get a background screening and is not sure what happend . He stated he will go today and resubmit his fingerprints.

Unclassified