STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965646	02/03/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARINA ALF	8830 CARIBEAN BOULEVARD MIAMI, FL 33157

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on . Marina ALF with Limited Mental Health component (lic # 9994) had the following deficiencies at time of the survey:

0026 - Resident Care - Social & Leisure Activities - 58A-5.0182(2) FAC

Based on observation, record review, and interview, the facility failed to provide social, recreational or educational activities for 2 out of 5 (#1 and #2) sampled residents. The facility also failed to have an updated activities calendar posted.
Findings included:
On , observed that Residents #1 and #2 in their 9:00 a.m. until 1:30 p.m. The caregiver did not offer any activities to the residents during survey.
Reviewed the bulletin board, where the facility's documents were posted, showed the activities schedule was for , 2017.
On at 10:30 a.m. the facility's Owner/ Caregiver acknowledged the activities calendar was not updated. She stated, "I replaced the activities calendar for the month of , 2017."
Class III

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on record review and interview, the facility failed to notify the agency of the change of administrator within 10 days. The facility also failed to have the administrator's proof of high school diploma.
Findings included:
An Internet search of the Florida heath finder website showed that the facility did not have available administrator.
Record review showed that Staff B administrator was hired on . Record review also found the administrator did not have proof of high school completion, the facility had a notarized letter the administrator completed high school.
During an interview on at 10:15 a.m. the Owner contact facility administrator over the phone. She stated my new consultant sent the change of administration to the agency. She stated I do not have documentation.
Class III

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

Based on observation, record review, and interview, the facility failed to have evidence of a negative examination documented on an annual basis for 1 out of 5 sampled staff (D).
Findings included:

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Observation on at 9:00 a.m. found Staff D was in the facility assisting two residents with activities of daily living and preparing daily food for them.
Review of Staff D's personnel record showed that she did not have their annual documentation of negative examination. The last statement on file for Staff D (caregiver) was dated .
Interview conducted on at 10:55 a.m. with the Owner/ Caregiver who reviewed the employee records for the missing documentation, she acknowledged that Staff D did not have updated test.
Class III

0079 - Staffing Standards - Levels - 58A-5.019(3) FAC

Based on observation, record review, and interview, the facility failed to maintain a written work schedule which reflects its staffing pattern for a given time period.
Findings included:
Reviewed the bulletin board where the facility's documents were posted was found staffing scheduled for , 2017.
During an interview on at 1:27 p.m. the facility owner acknowledged that staffing scheduled was not updated. She stated, "I just replaced for the new one."
Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on observation, record review, and interview, the facility failed to ensure that 2 out of 5 (Staff C and E) sampled employees had completed employment applications with references.
Findings included:
Observation on at 9:32 a.m. Staff E (caregiver) arrived at the facility to work.
Record review of Staff C (manager) and E (caregiver)'s personnel files showed did not have a completed application with references.
During an interview on at 11:07 a.m. the Owner acknowledged that Staff C and E did not have employment applications on file.
Class III

L243 - LMH - Training - 429.075(1) FS; 58A-5.0191(8) FAC

Based on observation, record review, and interview, the facility failed to ensure 1 out of 5 (Staff D) received the required Limited Mental Health (LMH) training.
Findings included:
Observation on at 9:00 a.m. Staff D (caregiver) was at the facility assisting two residents with activities of daily living and preparing daily food for them.
Review of Staff D (caregiver)'s personnel record showed it did not contain documentation of limited

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mental health training for review during survey.
Interview conducted on at 10:55 a.m. the Owner reviewed the personnel record for the missing documentation, she acknowledged that Staff D did not have limited mental health training.
Class III

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Z813 - Results of Screening & Notification In File - 59A-35.090(3)(c), FAC

Based record review, and interview, the facility failed to have signed attestations for 3 out of 5 (staff C, D and E) sampled staff.

Findings included:

Record review showed Staff C, D, and E did not have signed attestations on file for review.

During an interview on at 10:35 a.m. facility Owner acknowledged that Staff C, D, and E did not have signed attestations on file for review.

Unclassified Deficiency

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS

Based record review, and interview, the facility failed to have an updated background screening completed for 1 out of 5 (C) sampled staff that had a break in services for more than 90 days.
Findings included:
Record Review showed that Staff C (manager) did not have employment verification of previous employment since. There was not documentation of employment for Staff C within the last 90 days.
Per the Owner's declaration on at 10:35 a.m. Staff C was hired on and she didn't know his last employment. The last background screening was dated (eligible).
Unclassified Deficiency