STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966860	**03/13/2017**
NAME OF PROVIDER OR SUPPLIER **EL DORAL ASSISTED LIVING FACILITY INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **9795 NW 27 TERRACE** **MIAMI, FL 33172**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on . El Doral Assisted Living Facility (License #11022) had the following deficiencies found at the time of the visit:

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

Based on record review and interview, the facility failed to provide documentation of a negative examination annually for one of four sampled staff (Staff C).

Findings:

A review of the staff schedule for 2017 showed that Staff C was scheduled to work in the facility daily and was identified on the schedule as 'live-in' staff.

A review of the personnel record showed that the most recent documentation of freedom from for Staff C, hired , was dated .

On at approximately 12:00 p.m., the Administrator stated that Staff C had an emergency and could not come to work. However, when asked to provide contact information for Staff C, the Administrator stated that Staff C no longer worked at the facility.

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

Based on record review and interview, the facility failed to have the minimum staff hours per week, and failed to have an accurate staffing schedule.

Findings:

A review of the staff schedule showed that it did not show amount of hours each staff worked. The schedule only showed the names of Staff A and Staff C with days of week they worked.

On at 12:00 noon, the Administrator acknowledged the staffing schedule did not show the amount of hours each Staff were working during the week. The Administrator further stated that Staff C had an emergency and could not come to work.

On at 12:20 p.m. when the Administrator was asked for a contact phone number for Staff B, she stated that Staff B was not working in facility anymore. The Administrator acknowledged that the staffing schedule was not accurate because she was the only staff working.

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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 provide documentation that 1 of 4 staff received 4 hours of training on assisting residents with self administration of medication (Administrator).

Findings:

Staff record review showed that there was no documentation of 4 hours of training on assisting residents with self administration of medication for the Administrator (hired on).

On at 11:00 a.m. the Administrator stated that she passed the training but was unable to provide proof of it.

On at 4:00 pm, observed the Administrator providing assistance with self-administration of medications to Resident #3.

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on record review and interview the facility failed to have an up-to-date emergency management plan or annual sanitation . The facility also had no documentation of current liability insurance.

Findings as follow:

Record review showed the facility's Emergency Management Plan was dated . The sanitation inspection was dated and the liability insurance expired on .

On at 12:00 noon the Administrator acknowledged that the Emergency Management Plan, sanitation inspection, and liability insurance had to be renewed, that she was planning to send all of the applications in.

Class III

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

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on record review and interview the facility failed to maintain an accurate staff roster in the Background Screening Clearinghouse database.

Findings:

A review of the Background Screening Clearinghouse database showed the facility had former Staff E and F still listed on the staff roster.

On at 12:00 noon the Administrator acknowledged the Background Screening Clearinghouse database roster was not accurate since Staff A was the only staff, and Staff E and F were not working there anymore.

Class III