STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967590	**03/21/2017**
NAME OF PROVIDER OR SUPPLIER **A SECOND HOME OF RIVIERA BEACH INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **120 WEST 22ND STREET** **RIVIERA BEACH, FL 33404**	

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

0000 - Initial Comments

A Relicensure survey was conducted on at A Second Home of Riviera Beach, License #11586. The facility had deficiencies at the time of the visit.

0052 - Medication - Assistance with Self-Admin - 58A-5.0185 (3)

Based on observation and staff interview, the administrator failed to follow assistance with self-administered medication specifications outlined in 429.256(3) F.S., and established and recognized community standards related to control, when assisting resident with self-administration of medication for 1 of 1 resident whose provision of medication was observed.

The findings include:

On at approximately 12:15 PM, the Administrator was observed assisting Resident #1 with self-administered medication. Resident #1 is seated at the Dining at this time. The following steps are taken by the Administrator:
1) The administrator washed her hands.
2) She removed bag of Resident #1's medications from locked medication cabinet in the kithen.
3) Administrator took a bottle of from the bag, opened the container and shook some pills out into the lid.
4) The administrator then used ungloved, bare fingers to pick up one of the pills to place it into the small med cup. The pill slipped out of the administrator's hands and lands on the floor.
5) The administrator took another pill with her bare fingers and placed into the cup.
6) She then used her bare fingers to place the remaining pills back into the bottle, dropping a 2nd pill onto the floor.
7) The administrator puts the cap on the medication bottle and places bottle back into bag.
8) She picked up the 2 pills on the floor and placed them on the counter to dispose of them after providing Resident #1 with her medication.
9) The administrator took the pill in the small cup to the resident seated at the table and told her that the cup contained her "medication".
10) The resident took the cup, and after verbal prompting, placed the pill into her mouth and chewed it up. The administrator offered her a drink to wash the medication down.
11) The administrator initialed the Medication Observation Record next to the medication provided.
12) She disposed of the 2 pills that on the floor per proper protocol.

The Florida Department of Elder Affairs Guide to Providing Assistance with Self-Administered Medications states staff must wear gloves when touching medications directly.

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The procedure outlined in 429.256(3) F.S states medication must be brought in its original, labeled container to the resident, and the person providing assistance is to read the label, informing the resident of the medication and dosage being provided.
On at 1:00 PM, the administrator was informed of the concerns noted during medication provision, and she acknowledged proper protocol was not followed.

Class III

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

Based on observation an staff interview, the facility failed to ensure newly hired staff (Staff A) had submitted documentation by a health care provider attesting that Staff A does not have any signs or symtoms of a communicable , or evidence of a negative tuburculosis ( ) examination, with 30 days of hire.

The findings include:

On at 11:40 AM, a notebook containing staff records was reviewed. Staff A had no documentation contained within the staff notebook.
When the Administrator was asked to provide Staff A's employee file, she responded, "She worked for me a few years ago, and I had all of her documentation then, but I put it away in a box, and I would have to look for it."

During interview with Staff A on at 11:12 AM, she stated, "I worked here a few years ago. [The Administrator] called me back to help out, but I'm not sure when I started, I really don't remember. I think about 3-4 weeks."

During interview with the Administrator on at 11:50 AM, she confirmed Staff A's hire date as . The Administrator also confirmed that Staff A had not provided documentation from a health care provider stating she was free from communicable , including , within 30 days of re-hire.

Class III

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

Based on observation, interview and record review, the facility failed to:
1) Provide all food items listed on Dietitian approved daily menu; Note substitute menu items of equal nutritional value before or at time of meal; and

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2) Post weekly menu in a conspicuous place, easily available to resident.
This affected 1 of 1 resident (Resident #1).

The findings include:

1) During breakfast observation on at 8:40 AM, the resident was served a cut up Banana, Hashbrowns, egg, and sausage patty. Review of the approved menu for week 3 (current week), showed breakfast meal to be served on this day was a banana, 4 oz /hot cereal, 1 Soft boiled egg, 1 slice. bacon, 2 slices toast with margarine.
The breakfast served on Tuesday was substituted for the Breakfast which was also to be served on Sunday, but there was no fruit juice or 1 slice. of toast with jelly. There was no substitution noted prior to, or at the time of, the meal.

During lunch observation on at 12:15 PM, Resident #1 was served 1/2 cup fruit Jello, 1/2 cup beef stroganoff/pasta, 1/2 cup tossed salad with dressing. The approved menu for this day is 6 ounces of Tomato Soup, Grilled Cheese Sandwich, Rotini Pasta Salad, Coleslaw, and Pears or Fresh Fruit. There was no substitution noted prior to or at the time of the meal for the following items: 1) the Beef Stroganoff Pasta for the Rotini Pasta Salad, 2) the Tossed Salad with dressing for the Coleslaw, and 3) the fruit Jello for the Pears or Fruit Jello. The 6 ounces of Tomato Soup and Grilled Cheese sandwich were not offered with the meal.

During interview conducted with the Administrator on at 12:50 PM, she stated, "I feed the resident what I know she likes and what she will eat...I will add substitutions to a substitution log, but I don't do it every time. I didn't write down the substitutions for today." The Administrator acknowledged the need to follow the approved menu and document any substitutions prior to or at time meal is served. She also acknowledged it necessary to provide all menu items to the resident to allow for Resident to decide how much she will eat.

2) During tour of the facility, the weekly menu was not seen posted in a conspicuous area, easily available to the resident.
On , the Administrator stated she usually enlarges the weekly menu, laminates it, and posts it on the wall in the activity . She added that she hasn't had the chance to get to the printers to make the copies for posting. The menus were approved and signed on .

Class III

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

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Based on record review and staff interview, the facility failed to maintain personnel records for each staff member currently employed, for 1 of 1 staff (Staff A).

The findings include:

On at 11:40 AM, a notebook containing staff records was reviewed. Staff A had no documentation contained within the staff notebook. When the Administrator was asked to provide Staff A's employee file, she responded, "She worked for me a few years ago, and I had all of her documentation then...her application, training certificates. When she left, I put everything away in a box, and I am not really sure where it is. I would have to look for it."

During interview with Staff A on at 11:12 AM, she stated, "I worked here a few years ago. [The Administrator] called me back to help out, but I'm not sure when I started, I really don't remember. I think I have been back for 3-4 weeks."

During interview with the Administrator on at 11:50 AM, she confirmed Staff A's hire date was . The Administrator had not retrieved, or reviewed Staff A's records for compliance, since date of hire.

Class III

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

Based on record review and staff interview, the facility failed to:
1) Obtain a new background screening for an employee returning to work after a break in employment greater than 90 days (Staff A).
2) Maintain the employment status of all employees within the clearinghouse within 10 business days of hire or changes in status (Staff A);

The findings include:

On at 8:50 AM, Staff A was observed providing assistance to Resident #1 by feeding her part of her breakfast meal, and encouraging the resident to continue eating independently.

During interview with Staff A on at 11:12 AM, she stated, "I worked here a few years ago. [The Administrator] called me back to help out, but I'm not sure when I started, I really don't remember. I think I have been back for 3-4 weeks."

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On at 11:40 AM, a notebook containing staff records was reviewed. Staff A had no documentation contained within the staff notebook. When the Administrator was asked to provide Staff A's employee file, she responded, "She worked for me a few years ago, and I had all of her documentation then...her application, training certificates. When she left, I put everything away in a box, and I am not really sure where it is. I would have to look for it."

During interview with the Administrator on at 11:50 AM, she confirmed Staff A's hire date was . The Administrator stated that Staff A had not been employed for some time prior to this hire date. The Administrator stated, "She [Staff A] is retired." The administrator could not provide an application, or proof of employment history, for Staff A.

On , a review was conducted of the Agency's Background Screening Unit for current BGS employment eligibility and employment history. Staff A had a background screening completed, and she was found eligible for employment on , but there was no employment history on file with the Agency's BGS Clearinghouse.

A review of the facility's Employee Roster on the Agency's BGS Clearinghouse website revealed Staff A had not been added to the list of current employees for this facility as of .