

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/07/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11932642	(X3) DATE SURVEY COMPLETED 03/24/2017
NAME OF PROVIDER OR SUPPLIER GREEN PALMS HOME, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 17430 SW 118 PLACE MIAMI, FL 33177	

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

0000 - Initial Comments

A Change of Ownership Survey was conducted from _____ to _____, B & B Home Care II, Inc license # 8287, with a Limited Mental Health component had the following deficiencies found at the time of survey:

0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC

Based on observations, record review and interview, the facility failed to have medication locked at all times. The facility also failed to discard abandoned medications for 1 of 6 sampled residents (#6).

Findings included:

On _____ at 9:00 A.M. during a facility tour, observed an unlocked medication cabinet in the kitchen. Inside was medication in a red paper bag for Resident #6, who had left the facility.

A review of the admission and discharge log revealed that there was no date or place of discharge recorded for Resident #6.

At 9:10 A.M. Staff C reviewed the medications to identify the reason why they were found in a red paper bag. The medications in the bag for Resident #6 were: _____ 1 mg/ _____ 1 M (4 bottle), _____ 10/ _____ Sulf 100 mg/ _____ 10 mg/ _____ 650 mg. She stated "You need to wait for the Administrator."

During an interview on _____ at 9:47 a.m., reviewed the medication with the Administrator, who acknowledged that they were unlocked. She stated that Resident #6 went to the hospital more than 2 months earlier. She also stated "I forget to give it to the pharmacy."

Class III

0057 - Medication - Over The Counter (OTC) Products - 58A-5.0185(8) FAC

Based on observations and interview the facility failed to ensure that over the counter (OTC) medications were labeled with the resident's name.

Findings included:

On _____ at _____ at 9:00 A.M. observed unlocked OTC medication cabinet in the kitchen. The medications were _____, _____ plus, Centrum Silver.

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During an interview on at 9:10 Staff C could not identify who these medications belonged to. She stated "You needed to wait for the Administrator." During an interview on at 9:47 A.M. the Administrator acknowledged that she had OTC medications without resident's name. 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 a minimum of 4 hours training on providing assistance with self-administered medications and safe medication practices in an Assisted Living Facility for one 1 of 3 (B) sampled staffs. Findings included: A review of the personnel file for Staff B revealed that there was no documentation of a minimum of 4 hours of training on providing assistance with self-administration of medications in file a time of survey. A review of the staffing scheduled for the month of 2017, showed that Staff B was scheduled to work at the facility from 7:00 P.M. to 7:00 A.M. During an interview on at 10:43 A.M., the Administrator stated that Staff B assisted residents with self-administration of medications as needed. She stated he does it during the time that is scheduled to work at the facility. Class III 0125 - Fiscal - Surety Bonds - 429.27(2) FS; 58A-5.021(3) FAC Based on interview and record review, the provider failed to have a surety bond with minimum bond proceeds that equal twice the value of the residents' monthly income for two out of five sampled residents (#1 and #2) . Findings included: During an interview on at 12:34 P.M., the Administrator stated that she received a check from a federal agency directly to the facility's bank account for Residents #1 and #2. She stated "I do not have		

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the surety bound yet." A review of facility records revealed there was no documentation of a surety bound . Class III 0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC Based on observation, record review and interview the facility failed to provide a clean environment, maintained free of hazards to five of five sampled residents (Residents 1-5). Findings included: On at 9:00 A.M., observed during a tour with caregiver (C) that the living cluttered and disorganized, containing extra furniture including file cabinets, closet doors left laying on their side in the area use by residents, kitchen cabinets doors paint peeling off, and below the kitchen sink, one cabinet door missing. A common area air conditioner vent had a black substance around it. # occupied by Resident #1 had two new mattresses standing in the middle of the At 9:10 am, staff C stated that the mattresses had been put there in case they needed to be used . The patio had dilapidated furniture which appeared hazardous. During an interview on at 11:53 A.M., the Administrator acknowledged that facility was not organized and had unused or dilapidated furniture in areas use by residents and could cause hazards to residents She stated "We are painting the facility to clean up." Class III 0160 - Records - Facility - 58A-5.024(1) FAC Based on observation, record review and interview the facility failed to have an update Admission/Discharge log. Findings included: Observation on at 9:00 A.M. during facility tour was found unlocked medication cabinet in the kitchen, inside was medication red paper bag from Resident #6 that left the facility. List of medications: 1 mg/ 1 M (4 bottle), 10/ Sulf 100 mg/ 10 mg/ 650 mg.		

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A review of the admission and discharge log revealed that there was no date of discharge or place Resident #6 do not have date of discharge or place that she was discharge. At 9:10 A.M. Reviewed medication with Staff C to identify the reason why medication were found in a red paper bag. During an interview on at 9:47 A.M., the administrator stated that Resident #6 went to the hospital more than 2 month ego. The administrator acknowledged that admission and discharge log did not have date when Resident #6 was discharge and place hospital name that she was transferred. Class III L241 - LMH - Records - 429.075(3-4); 58A-5.029(2) FAC Based on record review and interview, the facility failed to have a signed annual Community Living Support Plan and agreement for 1 of 6 sampled residents (Resident #2). Findings included: Record review revealed that Resident #2's (admitted on) health assessment (AHCA form 1823) dated had diagnoses chronic () and received Florida Optional State Supplement () for the amount of \$78.40. The Community Living Support Plan and agreement was dated and was not signed by Resident #2, power of attorney or legal guardian. During an interview on at 11:05 A.M., the Administrator acknowledged that Resident #2's Community Living Support Plan and agreement was not signed by the Resident, power of attorney or legal guardian. Class III		

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

Based on record review and interview the facility failed to maintain an accurate employee roster in the background screening clearinghouse database.

Findings included:

A review of the staff schedule showed Staffs D, E and F no longer worked at the facility.

A review of the facility's roster in the Background Screening Clearinghouse database showed that Staff D, E and F were registered without an end date.

During an interview on _____ at 2:28 P.M., the Administrator stated that Staff D, E and F are not working at the facility. She stated that it isn't possible that the background screening roster is not updated "because my son did it. Someone sabotaged here."

Unclassified