STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968040	**03/29/2017**
NAME OF PROVIDER OR SUPPLIER **MARLA GROVE ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3705 SW 1 AVENUE** **MIAMI, FL 33145**	

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

0000 - Initial Comments

An Abbreviated Biennial Survey was conducted on . Marla Grove ALF, Inc. (AL12009) with Limited Mental Health component had the following deficiencies found at the time of the survey:

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

Based on observation, record review, and interview the facility failed to ensure that 1 out of 6 (Resident #3) sampled residents met continued residency criteria.

Findings as follow:

On at 9:00 a.m. observed Resident #3 in bed. Staff C was preparing to bathe her in bed.

On at 9:05 a.m. Staff C stated resident was not ambulatory and bathe her in bed. Staff C stated to sit and transfer Resident #3 she needed the assistance of other staff.

On at 9:05 a.m. Resident #3 stated she could not walk because had a bone illness and is bathed in bed.

On at 11:00 a.m. the Administrator acknowledged Resident #3 was non ambulatory.

Class III

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

Based on observation, record review, and interview the facility failed to have freedom from communicable including ( ) for 1 out of 7 (Staff G) sampled staff.

Findings as follow:

On at 9:00 a.m. Staff G observed working in facility with 13 residents.

Record review showed the facility facility had no documentation of the freedom from communicable including statement for Staff G, hired on .

On at 12:30 p.m. the Administrator acknowledged the facility had no the freedom from communicable statement including for Staff G.

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Class III

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

Based on observation, record review, and interview the facility failed to have a written work schedule that reflects its 24-hour staffing pattern for a given time period

Findings as follow:

On . . . . . at 9:00 a.m. Staff B and G were observed working in facility. On . . . . . at 9:30 a.m. Staff A arrived.

Staffing schedule review (2017) showed:
Staff G did to appear in the schedule.
Staff A and B were scheduled to work on from 7 a.m. to 7 p.m.

On at 12:30 p.m. the Administrator acknowledged the staffing schedule was not accurate.

Class III

0125 - Fiscal - Surety Bonds - 429.27(2) FS; 58A-5.021(3) FAC

Based on interview and record review the facility acted as a payee for 5 out of 14 (Resident #2, #3, #4, #10 and #13) sampled residents without having a surety bond.

Findings as follow:

On . . . . . at 11:40 a.m. the Administrator stated the checks of Residents #2, #3, #4, #10 and #13 come to facility bank account under the facility name. The Administrator stated the facility had no surety bond.

Record review (copy of residents checks) showed Residents #2, #3, #4, #10, and #13's checks came under the assisted living facility's name.

Class III

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

Based on record review and interview the facility failed to ensure that 2 out of 7 (Staff A and D) sampled

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staff received Limited Mental Health continuing education training every two years.

Findings as follow:

Record review showed the facility failed to documentation of the Limited Mental Health continuing education training for Staff A and D. Record review showed Staff A and D's last Limited Mental Health continuing education training was dated .

On at 12:30 p.m. the Administrator acknowledged staff Limited mental health continuing education training was expired.

Class III

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

Based on observation, record review, and interview the facility failed to register 1 out of 7 Staff (Staff G) with the clearinghouse's employee roster.

Findings as follow:

On . . . . . at 9:00 a.m. Staff G was observed working in facility with 13 residents.

Staff application for employment review showed Staff G was hired on . . . . . .

Clearinghouse website review showed the facility failed to register Staff G at the mentioned website as a facility employee.

On . . . . . at 12:30 p.m. the Administrator stated Staff G was not registered in the clearinghouse website because she only covers other staff days off.

Unclassified