STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966894	**04/05/2017**
NAME OF PROVIDER OR SUPPLIER **WESTVIEW PLEASANT LIVING, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2140 NW 126 STREET** **MIAMI, FL 33167**	

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

0000 - Initial Comments

A Standard Biennial Survey conducted on , , 2017 at Westview Pleasant Living Inc. (license 11035) with Limited Mental Health component had deficiencies found at the time of the survey.

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

Based on record review and interview the facility failed to have an accurate health assessment for two of five sampled residents (#s 1 and 2).

Findings included:

Observation on at 9:00 am found Resident #1's medications were centrally stored by the facility.

Record review found the Medication Observation Record for Resident #1 was signed by staff .A review of Resident #1's file revealed that the medication section on the health assessment had been left blank.

A review of Resident #2's file revealed that the medication section and criteria requirements on the health assessment were left blank.

Staff D stated on at 1:20 pm that she will get the health assessment reviewed for Residents 1 and 2 by the doctor.

Class III

0031 - Resident Care - Third Party Services - 58A-5.0182(7) FAC

Based on observation, interview, and record review, the facility failed to provide documentation of administration from a third party for one of five sampled residents (#2) .

Findings included:

Observation on at 9:33 am revealed Resident #2's was locked in the refrigerator.

Record review found Resident #2 did not have any documentation regarding administration. Resident #2's file also did not have an order on file.

Interviewed on at 1:00 pm, Staff D stated, "I have no information of the administration and/or order in Resident #2's file."

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Class III

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

Based on record review and interview the facility failed to have written statements from a health care provider documenting that the individual does not have any signs or symptoms of communicable for two of six sampled staff (E and F). The facility failed to ensure staff had proof of a negative examination documented on an annual basis for three of six sampled staff (A, B, and D).

Findings included:

Record review showed Staff E (hired on) and Staff F (hired) did not have written statements from a health care provider documenting that they did not have any signs or symptoms of communicable within 30 days of employment.

Record review showed Staff A and B's last statements were dated and Staff D's last statement was dated . The facility did not have negative exams updated annually.

Interviewed on at 12:30 PM, Staff D, after review of staff documents, acknowledged that they did not have an updated test completed.

Class III

0081 - Training - Staff In-Service - 58A-5.0191(2) FAC

Based on observation, record review, and interview, the facility failed to ensure that staff received in-service training regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment for one of six sampled staff (F). The facility also failed to ensure that staff who prepare or serve food, who have not taken the assisted living facility core training received a minimum of 1-hour-in-service training within 30 days of employment in safe food handling practices.

Findings included:

Staff F was observed on at 9:00 am cleaning and walking in resident areas.

Record review of Staff F's file revealed Staff F was hired on . A review of Staff F's personnel record revealed that there was no safe food handling training certificate available for review. Personnel record review of Staff F revealed that there was no copy of the certificate that proves that she

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participated in an in-service training regarding the facility's resident elopement response policies and procedures.

Interview on at 12:50 pm Staff D stated, " Staff F is here three hours every day from 8:30 am - 11:30 am. She does activities, cleaning, making sandwiches, serving meals and washing clothes, I did not know she needs that training, she is only here for three hours."

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 admission /discharge log.

Findings included:

Observation on at 9:00 am revealed four residents sitting on the main living one leaving for a day program.

Record review revealed six residents on the admission/discharge log (Residents 1-6).

Interview on Staff D revealed that the facility had only five residents (Residents 1-5), but she forgot to take Resident 6, a resident that no longer lived in the facility, off of the admission/ discharge log.

Class III

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

Based on record review and interview, the facility failed to have completed Attestations of Compliance with Background Screening for six of six staff (Staff A, B ,C,D,E, F).

Findings included:

Observation on . . . at 9:00 am showed Staff E and F in the facility. Observation on . at 10:00 am showed staff D arrived to the facility.

Record review showed that the facility's updated staffing pattern reflected Staff A-F.

Record review revealed that there was no documentation of completed Attestations of Compliance with Background Screening on file Staff A-F.

During an interview on . . at 12:43 pm, Staff D acknowledged that Staff A-F did not have Attestations of Compliance with Background Screening on file.

Unclassified

Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on observation and record review, the facility failed to ensure that one of six sampled staff (F) had an eligible Level II Background Screening result.

Findings included:

Observation on . . . at 9:00 am showed Staff F cleaning and walking in resident areas.

A review of the facility's updated staffing schedule reflected Staff F as working on several shifts.

A review of the background screening clearinghouse database revealed Staff F's background screening status stated "awaiting privacy policy."

Unclassified