STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911401	**04/18/2017**
NAME OF PROVIDER OR SUPPLIER **SANTA BARBARA HOME I**	STREET ADDRESS, CITY, STATE, ZIP CODE **3319 SW 24 TERRACE** **MIAMI, FL 33145**	

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

0000 - Initial Comments

A Standard Survey (Monitoring) was conducted on and concluded on . Santa Barbara Home I with a Limited Mental Health component License # 5058 had the following deficiencies found at the time of the survey:

0026 - Resident Care - Social & Leisure Activities - 58A-5.0182(2) FAC

Based on observation, record review, and interview the facility failed to offer and provide social, recreational or educational, and other activities to the residents. The facility also failed to have an activities calendar posted.

Findings include:

A review of facility's bulletin board revealed activities calendar was not posted.

On at 12:37 PM Interview with Resident #2 stated "No, I have been not been offered any activities here."

. . . . . at 2:30 PM Resident #3 stated, "No, we never do any activities."

. . . . . at 2:40 PM Resident #4 stated, "No, we do not have activities."

. . . . . at 2:47 PM Resident#5 stated, "No, they do not have any activities here."

. . . . . at 3:38 PM Resident #7 stated, "No, we do not have any activities,"

On . . . . . from 11:30 am until 4:30 PM observed residents were sitting watching television and staff did not offer or conduct any activities

Class III

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on record review and interview the facility failed to have an available Administrator responsible for the operation and maintenance of the facility.

Findings include:

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A Review of the health finder website revealed that the facility had no available administrator.

Interview on 9:53 AM the Financial Officer stated she will contact the licensing unit regarding the Administrator, she was not aware that Staff A was no longer the administrator listed on the health finder website.

Class III

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

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

Findings include:

On at 11:25 AM arrived to the facility and was greeted by Staff C. Observed Staff B in the kitchen and Staff D also present in the facility.

A review of staff schedule for revealed Staff E was scheduled from 7:00 AM -3:00 PM, and Staff D was scheduled as "OFF", Staff G was scheduled from 8:00 AM-5:00 PM, and Staff F was scheduled from 3:00 PM-11:00 PM. Staff C was not listed on the schedule.

On at 12:30 PM Staff A stated "the schedule is not right; I have to correct it because Staff F and Staff G called out, Staff E is out of town, and I have to add Staff C to it."

Class III

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

Based on observations, record review, and interview the facility failed to follow the posted menu. The facility also failed to note the substitutions before or when the meal was served. The facility failed to provide meals that adapt to the resident's food habit and preference.

Findings included:

On at 8:12 AM observed lunch served to residents was rice with chicken, noodles mixed with potatoes, yams and tomato salad.

Reviewed posted Menu for , 2017 included 1 Cup of Ziti with 4 oz. Ham and cheese 1 Cup of

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mixed salad, a dinner roll and ½ cup of peaches. The substitution was not made to menu prior or during meal being served.

On . . . . . at 1:30 PM Owner stated "The staff schedule is no followed because we usually follow this alternate menu; we mostly prepare Latin food and when a resident is admitted to our facility we explain to that this is the type cuisine is served in the ALF.

On . . . . . at 12:37 PM Resident #2 stated, "The food is terrible."

On . . . . . at 2:30 PM Resident#3 stated, "The food is alright, there are days that the food is good and days that the food is not great."

On at 2:47 PM Resident #5 stated, "No, the food is ok. I do not like Cuban food every day, but they will offer me a sandwich."

On . . . . . at 3:38 PM Resident #7 stated ,"Its okay, is not that is bad but there is a lot of Latin food."

Class III

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

Based on record review and interview the facility with limited mental health license, failed to provide documentation of the Limited Mental Health training requirement for 1 out of 8 sampled staff (Staff E).

Findings include:

A record review of Staff E's employee file revealed staff was hired on . . . . . ; the file did not have documentation of the Limited Mental Health training.

On at 3:49 PM Staff A stated, "I know Staff E took the training, but I do not have the document that she received it, I have to look for it."

Class III

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

Based on observation and record review the facility failed to register five out eight staff in the Background Screening's Clearinghouse (Staff B, C, D, E, and Staff H).

Findings include:

On . . . . . at 11:25 AM arrived to the facility and was greeted by Staff C. Observed Staff B in the kitchen and Staff D also present in the facility.

A review of staff schedule for revealed Staff E was scheduled from 7:00 AM -3:00 PM, and Staff D was scheduled as "OFF", Staff G was scheduled from 8:00 AM-5:00 PM, and Staff F was scheduled from 3:00 PM-11:00 PM. Staff C was not listed on the schedule.

A Review of the Agency for Health Care Administration Background Screening Clearinghouse Database revealed Staff B, C, D, E, and Staff H were not listed in the employee roster.

Unclassified

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS

Based on observation, record review, and interview the facility failed to provide documentation of a current Level II background screening for 1 out of eight sampled staff, (Staff B). Staff B had a break in service of more than 90 days without obtaining a new background screening.

Findings include:

On . . . . . at 11:25 AM observed Staff B in the kitchen.

A review of Staff B's employee file showed Staff B was hired on . . . . . , and the last eligible background screening result on file was .

On at 1:00 PM Staff stated "There is no record of where Staff B worked before, she didn't fill that information out and she is not sure of the dates of where is worked before."

Unclassified