STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964978	R 03/28/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HUMBLE CARE ALF	**14651 SW 161 STREET** **MIAMI, FL 33177**

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

0000 - Initial Comments

A Standard Biennial Revisit Survey was conducted on 03/28/17. Humble Care ALF with a Standard License #9482 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 have an accurate health assessment (AHCA form 1823) that reflected what kind of assistance 1 out of 5 sampled residents needed with medication (Resident#1).

Findings included:

A review of Resident #1' file revealed the health assessment dated . . . did not indicate what kind of assistance the resident needed with medication.

During an interview on at 11:55 A.M., Staff B acknowledged that health assessment for Resident #1 was not accurate.

Class III

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

Based on observation, record review, and interview, the facility failed to maintain a written work schedule that reflected its 24-hour staffing pattern for a given time period. The facility also failed to have staffing levels adequate to meet the scheduled and unscheduled needs of the census of 5 residents.

Findings included:

A review of the staffing schedule posted in the living . . . the month of . . . 2017 showed the following: Staff A and B starting work at 7:00 am.

During a tour of the facility on at 11:10 A.M., observed Staff B alone at the facility caring for 5 residents. Record review revealed that Resident's #1, # 3 and Resident # 5 received hospice care, and required full staff assistance with toileting, transferring, and bathing. Further observation showed that staff B was unable to attend to more than one resident at a time.

During an interview on . . . . . at 11:40 A.M,. Staff B stated "Both of us were working together just for now. The Administrator was here and she had to run out for a meeting."

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Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on observation, record review and interview, the Assisted Living Facility failed to have an up-to-date admission and discharge log.

Findings included:

Observation on at 11:10 A.M. during facility tour was observe Resident #1 in bed. Resident #5 was sitting on a sofa in the living , asleep. Resident #4 occupied # .

A review of admission and discharge log revealed that Residents #1 (admitted on), # 4 (admitted on), and #5 (admitted) were not listed on the admission and discharge.

On at 11:37 A.M. Staff B stated "I'm updating the admission and discharge log."

Class III

0162 - Records - Resident - 58A-5.024(3) FAC

Based on record review and interview, the facility failed to have documentation of the signed informed consent for unlicensed staff to assist them with self administration of medication, for 2 out of 5 sampled residents (Residents #1 and # 5).

Findings included:

A review of Residents # 1 and #2 's records showed that both records had an unsigned copy of the written informed consent for unlicensed staff to assist them with self administration of medication.

On at 1:00 P.M. Staff C acknowledged that Residents #1 and #5 receiving assistance with self-administration of medication, and that the consents for this were not signed by a resident/ legal guardian/responsible party.

Class III

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