

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966158	(X3) DATE SURVEY COMPLETED 05/10/2017
NAME OF PROVIDER OR SUPPLIER ADIUVO V	STREET ADDRESS, CITY, STATE, ZIP CODE 13232 SW 85 STREET MIAMI, FL 33183	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on , 2017. Adiuvo V (license # 10395) with Limited Nursing Services had deficiencies identified at the time of the survey:

0008 - Admissions - Health Assessment - 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on record review and interview the facility failed to have a complete initial health assessment done for 1 out of 5 sampled residents (Resident # 5).

Findings included:

A review of Resident # 5's record revealed that she was admitted on and had her initial health assessment completed on . The health assessment had the following sections in blank: nursing/treatment/ , no weight and no height; no type of assistance with transferring, if the resident requires 24 hours nursing or care; if the individual needs could be met at the facility; if the individual requires assistance with medications and the type of assistance needed with medications.

The Administrator stated on at 10:00 am that she will get the doctor to complete a new health assessment for the resident.

Class III

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

Based on record review and interview the Administrator, who operates 3 assisted living facilities, failed to appoint in writing two managers to assist in the operation and maintenance of those facilities.

Findings included:

Review of the bulletin board revealed that there was a manager appointed in writing.

A review of the sister facility's roster revealed that the manager was listed there as assistant administrator (manager).

On at 10:40 am when asked why the name of the manager was listed on the roster of the other facility, the Administrator stated that the named manager was also the manager for the other facility too because she had been told that he could be the manager for 2 facilities."

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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 provide evidence of a negative examination on an annual basis for 1 out of 4 sampled staff (Staff B). Findings included: Record review revealed that Staff B's last statement was dated On at 12:37 pm the Administrator stated, "We always have everything done together; it must be in the file at the other facility." Class III 0079 - Staffing Standards - Levels - 58A-5.019(3) FAC Based on record review and interview the facility failed to post an up-to-date staffing schedule. Findings included: During a tour of the facility on at 8:45 am, observed that the staffing schedule posted on the bulletin board covered the 5 weeks starting on . The staffing schedule had only Staff A and Staff C listed. On at 9:20 am Staff C stated that she lives in the facility from Monday to Friday and Staff D works Saturdays and Sundays. On at 9:35 am the administrator stated, "Staff D is new; she started working the weekend of 21. I need to fix the staffing schedule." Staff D was interviewed on at 2:18 pm and she stated that she works Saturdays and Sundays. Class III		

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0080 - Training - Core & Competency Test - 429.52(1-2) FS; 58A-5.0191(1) FAC Based on record review and interview the facility failed to ensure that the Manager participated in 12 hours of continuing education in topics related to assisted living every 2 years. Findings included: Record review revealed that the Manager passed the Core examination on _____ and the last 12 hour update of continuing education was completed on _____. On _____ at 12:35 pm the Administrator stated, "It must be at the other facility because we went together." Class III 0085 - Training & Nutrition & Food Service - 58A-5.0191(6) FAC Based on observation, record review and interview that facility failed to ensure that person designated by the administrator as responsible for the facility's food service and the day-to-day supervision of food service staff obtain, annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility for 3 out 4 sampled staff (A, C and D). Findings included: Staff C was observed on _____ at 11:30 am preparing lunch for the residents. Staff D stated on interview on _____ at approximately 11:00 am that she cooks on the weekends. Personnel record review for the administrator (Staff A), Staff C and Staff D revealed that there was no 2 hour Nutrition and Food Service training certificate. The Administrator stated on _____ at 12:40 pm, "I do not know if I have it. I always thought that the safe food handling one hour training was enough. None of us have it." Class III 0160 - Records - Facility - 58A-5.024(1) FAC		

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Based on record review and interview the facility failed to provide an up-to-date fire inspection. Findings included: Review of the fire inspection revealed that the permit expired on the last day of , 2017. On at 9:45 am the Administrator stated, "I know I have one that expires on , but I do not know where." At 10:10 am she received a picture of the fire permit that expires on , 2017 from the fire department on a phone message and she stated, "I know what happened, I took all the inspections home because I was going to do the renewal of the application tomorrow in my house. I thought that AHCA was coming after I send the application." There was no documentation of the current fire permit in the facility. Class III 0162 - Records - Resident - 58A-5.024(3) FAC Based on record review and interview the facility failed to provide documentation of the appointment of a health care surrogate, health care proxy, guardian, or the existence of a power of attorney for 2 out of 5 sampled residents (Resident # 1 and # 5). Also the facility failed to initiate a weight record on admission for 1 out 5 sampled residents (Resident # 5). Findings included: A review of Resident # 1's record revealed that her contract and all other forms in her record had been signed by her son and that there was no document appointing him as the legal representative. On at 11:30 am the administrator stated, "I know I have the power of attorney (POA) somewhere." She called Resident # 5's daughter-in-law, who stated that the Administrator had the POA document. A review of Resident # 5's record revealed that her contract and all other forms in her record had been signed by her daughter and that there was no document appointing her as the legal representative. Also revealed that there was no initial weight on the record. Observed that Resident #5 was weighted during the inspection, at 12:01 pm. On at 12:07 pm, the Administrator stated, "I am going to call Resident # 5's daughter now."		

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Class III 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on record review and interview the facility failed to review the emergency plan on an annual basis. Findings included: Review of the emergency plan revealed that it was last approved on On at 9:44 am the Administrator stated "we already sent it but it was hand delivered. I do not have proof." On at 12:54 pm, the person that has to approved the emergency plan stated by telephone, "I received it at the end of; the expiration date was They sent it on time. It takes up to 60 days for us to process it. They will receive it this week or next week." Class III		

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