STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967577	**05/03/2017**
NAME OF PROVIDER OR SUPPLIER **CALVINELLE ADULT HOME ALF #2**	STREET ADDRESS, CITY, STATE, ZIP CODE **1786 NW 47 TERRACE MIAMI, FL 33142**	

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

0000 - Initial Comments

A standard biennial survey was conducted on , 2017. Calvinelle Adult Home Alf #2 with limited mental health and extended congregate care components and license # 11635 had the following deficiencies identified at the time of the survey:

0052 - Medication - Assistance with Self-Admin - 58A-5.0185 (3)

Based on observation, interview and record review, the Assisted Living Facility failed to follow the procedure outlined by the state while assisting two out of 10 sampled residents with medication (#1 and #9) . The caregiver failed to read medicines labels to residents.

Findings included:

Observation on at 6:59 AM revealed the Caregiver D passed a little cup with medicines inside and a cup with juice to Resident #1 . Caregiver D did not read the name of the medicines to Resident #1.

Interviewed on at 6:59 AM, Resident #1 stated, "They always do it like that. I do not know the names of my medicines."

Observation on at 7:12 AM revealed that Caregiver D touched the medicines directly with her hand without using gloves and put the medicines into a cup. Caregiver D gave that cup to Resident #9. Caregiver D did not read the name of the medicines to Resident #9.

Review of Resident #1's Medication Observation Records (MORs) revealed that medicines scheduled on at 7 AM were: , Sod DR 500 mg, , 3 mg, , 12.5 mg, , 81 mg, , Mes 1 mg, , ER 25 mg, , DR 40 mg, , HBR 20 mg.

Review of Resident #9's Medication Observation Records (MORs) revealed that medicines scheduled on at 7 AM were: , , 15 mg, 24 HR ER 300 mg, , Dod ER 250 mg, DR 60 Mg, Hydrochlorothiazine 25 mg, , 40 mg, CL ER 20 MEQ, D3 2000 unit, Omega-3 Ethy/ 1 gm, , 100 mg.

Class III

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

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Based on record review and interview, the Assisted Living Facility failed to maintain a written work schedule that reflects its 24-hour staffing pattern.

Findings included:

Review of staff schedule revealed that it showed that staff members work day, evening or night shift but it did not indicate the hours covered by each shift.

An interview on at 11:33 AM the Owner stated, "Yes, we need a key. (to associate staff names with the letters and schedules representing them on the schedule.) Sometimes we need to move people around."

Class III

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

Based on record review and interview, the Assisted Living Facility failed to ensure that one out of 10 staff members received a minimum of one training on recognizing and reporting resident . . . . . , neglect, and , within 30 days of employment (Caregiver F).

Findings included:

Review of Caregiver F's personnel record revealed that her hire date was . There was no documentation that the employee had completed training on Recognizing and reporting resident . . . . . , neglect, and , .

Interviewed on at 11:10 AM, the Administrator revealed that he did not find documentation of the training.

Class III

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

Based on observation and record review, the Assisted Living Facility failed to note substitutions before or when the meal was served.

Findings included:

Observation on at 7:44 AM revealed that breakfast served was black coffee, hash brown,

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scrambled eggs, orange juice, apple juice, bagel and milk.

Review of menu showed for breakfast on , assorted juices (4 oz.), waffles (2), egg (1), margarine (1 t), syrup, milk (8 oz.) was planned. Substitutions were not noted.

Class III

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

Based on record review and interview, the Assisted Living Facility failed toporvide documentation of a current annual fire inspection. The facility also failed to provide and up-to-date admission and discharge log.

Findings included:

A review of facility's records revealed that last fire inspection was completed on .

Interviewed on at 7:37 Am, the Owner stated, "I am waiting for them to come and inspect."

A review of the admission and discharge log revealed that Resident # 10 was transferred out on .

Interviewed on at 11:20 AM the Owner revealed that Resident #10 has not been discharged.

Class III

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

Based on record review and interview, the facility failed to maintain current and accurate demographic data for 10 f 10 sampled residents (Residents # 1-9).

Findings:

A review of records for residents # 1-10 showed that there was inaccurate or outdated emergency contact and or guardina information on the demographic data sheets.

On at 8:20 am, the Owner stated that she had all of the telephone numbers.. Observed the Owner seeking the telephone contacts for resident case managers or guardians in her personal cellular

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telephone. The owner then called the case manager for Resident #1 at a telephone number not listed in the resident's file.

Class III

E210 - ECC - Training - 58A-5.0191(7) FAC

Based on record review and interview, the Assisted Living Facility failed to ensure that one out of 10 sampled staff members (Caregiver J) complete at least 2 hours of Extended Congregate Care (ECC) inservice.

Findings included:

A review of Caregiver J's personnel file revealed that hire date was on . . . . . . There was no proof of the employee having completed ECC training.

Interviewed at 11:18 AM, the Owner stated, "She doesn't have it."

Class III

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

Based on record review and interview, the Assisted Living Facility failed to ensure that one out of 10 sampled staff (Caregiver J) complete a minimum of 6 hours of Limited Mental Health (LMH) training within 6 months of employment.

Findings included:

Review of Caregiver J's personnel file revealed that hire date was . There was no documentation that the employee had completed LMH training.

Interviewed on . . . . . at 11:16 AM, the Owner stated, " She is scheduled to go next week Wednesday, no, wait, it was today."

Class III

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

Based on interview and record review, the Assisted Living Facility failed to maintain the employment status of all of its employees on its roster within the background screening clearinghouse database. The facility also failed to ensure that any changes in status were reported within 10 business days.

Findings included:

A review of the Background screening clearinghouse database showed that facility's employee roster listed Caregiver E with hire date . . . . . but it did not show an end date.

Interviewed on . . . . . at 8:39 AM, the Owner revealed that Caregiver E stopped working at the facility last or .

Unclassified

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

Based record review and interview, the Assisted Living Facility failed to maintain a completed attestation of compliance with background screening form in records for one out 10 sampled staff members (Caregiver C) .

Findings included:

A review of Caregivers C's personnel file revealed that there was no documentation of a signed attestation of compliance with background screening.

Interviewed on . . . . . at 11:15 AM, the Owner stated, "She may not have it."

Unclassified.