STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967002	**06/06/2017**
NAME OF PROVIDER OR SUPPLIER **MIRAMAR SENIOR LIVING V**	STREET ADDRESS, CITY, STATE, ZIP CODE **5722 SW 165 COURT** **MIAMI, FL 33185**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on , 2017. Miramar Senior Living V (License #11121) had deficiencies identified at the time of the survey.

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

Based on observations, record review, and interview the facility failed to have completed health assessments for 2 out of 5 sampled residents (#3 and #4).

Findings included:

Record review of Resident #3's files revealed that the last health assessment was dated . The type of assistance needed with medications was marked both as assistance with self administration and medication administration. The name of the resident was written only on the first page. Also on the activities of daily living (ADLs) was marked both supervision and assistance for bathing, dressing, and toileting. The nursing/treatment/ services requirements section was left blank.

Staff B stated on at 11:10 am that the resident only requires supervision with all his ADLs and that he requires assistance with self-administration of medications.

Resident #3 stated on at 12:30 pm that he only requires assistance with his medications.

Resident #3 was observed during the length of the survey from 8:30 am to 1:50 pm walking, using the , and at lunch time he was observed eating on his own.

Record review of Resident #4's file revealed that the last health assessment was dated . The type of assistance needed with medications was left blank. Also the name of the resident was only written on the first page and the name was left blank on the other pages.

On at 12:15 pm observed the assistance with self-administration of medication for Resident # 4.

On at 10:15 am the owner of the facility stated, "I will fix whatever you find."

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(6) FAC

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Based on record review and interview the facility failed to ensure staff obtain , annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility for 1 out of 5 sampled staff (Staff E).

Findings included:

Record review of Staff E revealed that she had the last 2 hours training of nutrition and food service on .

On at 12:45 pm the owner stated, "Staff E works on call but she can work at any moment, so she needs the training."

Class III

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

Based on record review and interview the facility failed to have documentation of the appointment of a health care surrogate, health care proxy, guardian, or the existence of a power of attorney (POA) for 1 out of 5 sampled residents (# 3)

Findings included:

Record review of Resident #3 files revealed the contract was signed by the resident's daughter. The facility failed provide proof of the appointment of a health care surrogate, health care proxy, guardian, or POA.

On at 11:23 am the owner stated, "His daughter is the one signing for him and I do not have the POA copy."

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 approved on .

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On ..... at 10:25 am the owner stated this is the last emergency plan that they sent this year.

Class III

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SUMMARY STATEMENT OF DEFICIENCIES
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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 the signed attestation of compliance on-file for 5 out of 5 sampled staff (A, B, C, D, and E).

Findings included:

Review Staff A, B, C, D, and E personnel records revealed that they did not contain signed attestation letters.

On at 11:45 am the owner stated, "I did not even know that we needed that, but I already found it on the AHCA website and printed it out. I will give it to them to be signed."

Unclassified

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

Based on record review and interview the facility failed to maintain the employment status of all employees within the clearinghouse for 2 out of 5 sampled staff (A and B).

Findings included:

Review of the personnel record of Staff B revealed the staff member was hired on . Review of the clearinghouse website revealed that Staff B was not listed on the facility roster.

The owner stated on at 11:38 am, "She is listed at the other facility; we have to fix it."

Further review revealed that the owner name had an end date .

On at 11:40 am the owner called his wife (administrator) on the phone and told her, "they removed me from the roster." He also stated, "I am still the owner."

Unclassified