

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 08/01/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965432	(X3) DATE SURVEY COMPLETED 07/11/2017
NAME OF PROVIDER OR SUPPLIER RAINBOW GARDENS ALF #2	STREET ADDRESS, CITY, STATE, ZIP CODE 1801 NE 182 STREET MIAMI, FL 33162	

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

0000 - Initial Comments

A Complaint Survey (CCR #2017004477) was conducted on . Rainbow Gardens ALF #2 with a Standard License #9809 had the following deficiencies found at the time of the survey:

0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC

Based on record review and interview the facility failed to have written record of any significant changes for 5 out of 5 sampled residents (1-5).

Findings included:

Review of the residents records revealed the facility did not keep progress notes on file after the resident had significant changes in health or behavior.

On at 9:30 AM, According to the Administrator since she has had the facility no one has asked her for progress notes thus the reason why the resident files do not have progress notes.

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 staffing pattern that reflects its 24-hour staffing pattern for a given time period.

Findings included:

On at 7:30 AM observed Staff B and Staff C in care of the residents and providing personal services to the residents.

Record review found the facility did not have a staff schedule/pattern available for review.

On at 11:00 AM the Administrator stated she had forgotten to do the staff schedule for this week because she has had some personal issues, but she usually does it every week.

Class III

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Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS Based on record review and interview the facility failed to maintain employment status on the background screening's clearinghouse. Finding included: Review of the background screening database showed Staff D, Staff F, and Staff G as current staff members. Staff C hired date , background screening dated but was not listed on the facility's employee roster. Staff D, caregiver, stopped working at the facility on , Staff F, caregiver, stopped working in the facility on , and Staff G, caregiver, stopped working in the facility on . On at 11:45 AM the Administrator stated she did not know that these employees were still on the clearing house and that she was going to removed. Unclassified		