STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967330	07/13/2017
NAME OF PROVIDER OR SUPPLIER **MERCY & MICHAEL ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3000-3002 SW 23 TERRACE** **MIAMI, FL 33145**	

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

0000 - Initial Comments

A Complaint (CCR #2017004371) Survey was conducted on and concluded on . Mercy & Michael ALF, Inc with Limited Mental Health service component (License #11389) had deficiencies identified at time of the survey.

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

Based on observation, record review, and interview, the facility failed to have a health assessment completed by a health care provider within 30 days of admission for one out of six sampled residents (Resident # 1).
The facility also failed to have completed health assessment for one out of six sampled residents (Resident #6).

Findings included:

Resident record review showed that for Resident #1 admitted on and discharged on . The facility did not have a completed health assessment for Resident #1. Resident #6's last examination completed on did not specify what type of assistance the resident needed with medications or if the resident had .

Interview conducted on at 3:10 PM, the Administrator stated that Resident #1's physician completed a Health Assessment for her but she was unable to provide the documentation at the time of the survey. The Administrator confirmed that Resident's #6 health assessments was incomplete.

Class III

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

Based on record review and interview, the facility failed to provide care and offer personal supervision appropriate to the needs of residents, in order to prevent the residents from falling for one out of six (Resident #3) sampled residents. The facility failed to provide written records, of significant changes or illnesses which resulted in medical attention (hospitalization) for one out of six (Resident #3) sampled residents.

Findings Include:

Review of Resident's #3 record document she was admitted to the facility on and had a diagnosed of Major degenerative . The Health Assessment dated 11/ indicated she

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required assistance with bathing and was independent with the rest of the activities of daily living.

Hospital record review on at 3:00 PM showed Resident #3 was admitted to the hospital on after having suffering a . Resident #3 had a compression . The resident was discharged to the facility on with home health service and lumbar corset. On Resident #1 was admitted to the hospital for general and returned to the facility on .

There is no documentation that resident's physician and family members were notified. There is no documentation of any intervention created to minimize Resident's #3 in her record.

Interview conducted on at 3:10 PM, the Administrator stated "I was instructed that I did not need to write any notes. Resident #3 refused to use diapers. She urinate on the floor and slipped with her ."

Class III

0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28(1-2) FS

Based on observation, record review, and interview, the facility failed to limit physical to half bed rails for one out of six (Resident #4) sampled resident.

Findings included:

Observation on at 10:00 AM revealed Resident #4 had full bed rails attached to her beds.

Resident's #4 record review showed that the there was a written physician's order for the use of ½ bed rails dated .

Interview conducted on at 3:10 PM, the Administrator acknowledged the findings and she stated, "I am going to change the bed rails immediately."

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 four out of four staff (Staff A, B, C, and D) sampled staff.

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Findings included:

Staff record review revealed Staff A, Staff B and Staff D's last statement was dated . Staff C's last statement was dated . The facility did not have an updated statement.

Interview conducted on at 3:10 PM, the Administrator acknowledged the staff records for A, B, C and D had no documentation of evidence of a negative examination.

Class III

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

Based on observation, record review, and interview, the facility failed to maintain an accurate written work schedule.

Findings included:

Observation on at 9:40 AM showed Staff A and C were in care of the residents and providing personal services to them.

Staffing schedule review showed Staff A is scheduled to be in the facility 10 AM-1 PM, Staff B from 1 PM-7 AM, Staff C from 7 AM-1:00 PM, and Staff D from 7 AM-7 PM.

Interview conducted on at 3:10 PM, Administrator confirmed that the staffing schedule was inaccurate.

Class III

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(5) FAC

Based on record review and interview, the facility failed to provide annually, a minimum of 2 hours of continuing education training on providing assistance with self-administered medications and safe medication practices in an ALF for four out of four (Staff A, B, C and D) sampled staff.

Findings include:

Record review for Staff A, B, C, and D had no documentation that they received a minimum of 2 hours of continuing education training on providing assistance with self-administered medications and safe medication practices in an ALF. The last training for Staff A, C, and D was dated and for Staff B

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was dated .

Interview conducted on at 3:10 PM, Administrator stated that Staff A, B, C, and D assisted the residents with self-administered medications.

Class III

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

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

Findings included:

Review of the admission & discharged revealed the log did not have Resident #6 listed. The resident was admitted on .

Interview conducted on at 3:10 PM, Administrator confirmed that Resident #6 was not included in the admission & discharged log.

Class III

0165 - Risk Mgmt & QA; Adverse Incident Report - 429.23(1-4 & 6-10) FS; 58A-5.0241 FAC

Based on record review and interview, the facility failed to complete and submit one day and fifteen day adverse incident report for one out of six (Resident #3) sampled residents.

Findings Include:

Review of Resident's #3's Health Assessment dated 11/ indicated she required assistance with bathing and was independent with the rest of the activities of daily living.

Hospital record review on at 3:00 PM showed that she was admitted to the hospital on after having suffering a . She had a compression . She was discharged to the facility on with home health service and lumbar corset.

Interview conducted on at 3:10 PM, the Administrator stated "I was instructed that I did not need to write any notes. Resident #3 refused to use diapers. She urinate on the floor and slipped with her ." The Administrator stated she had not filed an incident report.

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Class III