STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11942941	08/09/2017
NAME OF PROVIDER OR SUPPLIER **CASA MARISA ALF INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **7435 SW 23 STREET** **MIAMI, FL 33155**	

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

0000 - Initial Comments

A Limited Mental Health Expansion Survey was conducted on , 2017. Casa Marisa ALF Inc. with license #8366 had the following deficiencies identified at the time of the survey:

0031 - Resident Care - Third Party Services - 58A-5.0182(7) FAC

Based on interview and record review, the Assisted Living Facility failed to ensure that a third party (Home Health Agency) left documentation in the facility of the services provided to one out of six sampled residents (#6) .

Findings included:

In an interview on at 12:13 PM the Administrator revealed that Resident #6 received care with a home health agency. She stated there was no record or documentation from that agency in the facility.

A review of the facility's record revealed that there was no record in the facility with the information about the home health agency for Resident #6.

Class III

0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC

Based on observation and interview, the facility failed to keep medications locked and secured at all times.

Findings included:

Observation on at 9:52 AM revealed that medication cabinet in the dining unlocked.

In an interview on at 9:52 AM the Staff C revealed that the hospice nurse just left it open. Staff C informed the hospice nurse that the medicine cabinet had to be closed because they were waiting for the inspection.

Observation on at 10:06 AM revealed there was a hospice comfort kit labeled with Resident #1's name unlocked in the refrigerator. The hospice comfort kit contained a prescribed set of medications kept in the facility for a medical crisis so that the hospice team could treat any distressing symptoms as quickly as possible.

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Class III

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

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

Findings included:

Observation on at 9:50 AM revealed that there was one staff on duty: Staff C.

Review of facility's record revealed that the staffing pattern posted on the bulletin board showed on , Staff B and Staff C worked from 7 AM and 7 PM. The Administrator was scheduled from 7 PM to 7 AM.

In an interview on at 9:56 AM Staff C stated, "Staff B stepped out for a moment because she had a doctor's appointment."

Class III

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

Based on record review and interview, the Assisted Living Facility failed to have an up-to-date admission and discharge log.

Findings included:

A review of the Admission and discharge log revealed that Resident #6 was not on the admission and discharge log.

In an interview on at 12:06 PM the Administrator revealed that Resident #6 moved to the facility on .

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
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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 Assisted Living Facility failed to maintain documentation of an eligible Level II background screening in the employee's personnel file for two out of three sampled staff (Administrator and Staff B).

Findings included:

Review of Administrator's personnel record revealed that the eligible Level II background screening result was dated . A review of the Background Screening Clearinghouse Daabase showed that the
Administrator's last screening was on and hire date was on .

Review of Staff B's personnel record revealed that proof of the eligibility results of employee screening in record showed . A review of the Background Screening Clearinghouse Daabase showed that Staff B's last screening was on and hire date was on .

In an interview on at 11:30 AM the Administrator stated, "It must be there because previous surveyor saw it. Let me call the consultant; she can sent it."

Unclassified