STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967079	R 08/10/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
L & B SOLUTION CARE, INC	**565 NE 137 STREET** **MIAMI, FL 33161**

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

0000 - Initial Comments

A complaint Investigation Second Re-Visit Survey CCR#2017001701 was conducted on , 2017. L & B Solution Care, Inc. with a Limited Mental Health component license# 11186 had the following deficiencies found at the time of the survey:

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

Based on record review and interview, the failed to have an accurate health assessment for three out of nine sampled residents (#4, 5 and 8).

Findings included:

Resident #4's health assessment dated showed he needed assistance with ambulation, bathing, dressing, transferring and toileting. Independent with eating and self-care ( ). The diet instruction was blank and did not indicate what type of assistance he needed for medications.

Resident #5's health assessment dated showed he was independent with dressing, eating & transferring. He needed assistance with ambulation. He needed assistance with bathing, self-care ( ), and toileting. The section on form, which indicates what type of assistance he needs, is blank.

Resident #8's health assessment dated completed showed he needs supervision with ambulation, bathing, dressing, and self-care ( ). He needed assist with toileting. He was independent with eating and transferring. The health assessment stated that the resident had a pressure . It documented 'yes', he had a interglugeal . O at 2:30 PM, the Administrator stated, "He does not have any pressure sores. I sent him to the doctor with my staff and when I look at the health assessment I see they put so I check myself. There was nothing there. I took it back to the doctor and the say they will not change it until they see him again."
Resident #9's health assessment dated documented that he needed assistance with all of his activities of daily living.

On at 4:00 PM, the Administrator acknowledged the health assessments for Resident #4, 5, & 8 were missing information.

Class III

0054 - Medication - Records - 58A-5.0185(5) FAC

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L & B SOLUTION CARE, INC	**565 NE 137 STREET** **MIAMI, FL 33161**

SUMMARY STATEMENT OF DEFICIENCIES
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Based on record review and interview the facility failed to maintain the medication observation record (MOR) for four out of four (#1, 2, 3, & 4) sampled residents.

Finding included:

Observations made at 9:30 AM Staff B was asked for the medication book. Staff B removed the book from cabinet, opened it and began initialing the log for 8 AM medications. Review of the Resident #1, 2, 3, & 4's medication sheets found the MOR was not initialed for 8 AM medications until 09:30 AM.

On at 9:45 AM with Staff B stated, "I gave them the medication but just stop to clean up. I was going to initial it."

Uncorrected
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 1 day initial adverse incident report.

Findings included:

On at 12:00 PM resident #2 eloped from the facility for over a week and was found 27 miles away from the facility.

On at 1:11 PM a phone interview was conducted with the Hospital risk manager, who stated that Resident #2 was found by police at a bus stop in Pompano Beach. She was disoriented and and was taken to a hospital in Broward under .
A review of the hospital records for Resident #2 showed grossly , , illogical and judgment severely , .

A review of the facility's record for resident #2 revealed that the resident was diagnosed with; , , , , , , . Further record review showed that on at 6:15 PM was observed that the resident was not at home and at 6:30 the caregiver notified the Administrator. At 10:02 PM facility called the police to report it. On resident also eloped for a few hours and no notes neither record of it were in the facility.

A review of the incident report database showed that the incident reports had still not been filed as of

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SUMMARY STATEMENT OF DEFICIENCIES
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Interview on at 3:45 PM with the Administrator stated, "I spoke to the supervisor in the agency office who told me if I surrender the license that everything would be clear. If I surrender my license, why should I have to correct the problem when the resident is not here anymore? They told me everything was cleared."

Uncorrected Class III