STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953310	R 08/15/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
A LOVING PLACE ALF	**25 WEST 26 STREET** **HIALEAH, FL 33010**

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

0000 - Initial Comments

An Abbreviated Biennial revisit Survey was conducted on . A Loving Place ALF, with Limited Mental Health Component, (AL7846) had the following deficiencies found at the time of the survey:

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

Based on record review and interview, the facility failed to ensure that 3 out of 11 sampled residents (#9, #10 and #11) had a face to face medical examination within 30 days of admission.

Findings included:

A review of the admission and discharge log revealed that Resident # 9 was admitted on and #10 was admitted on . Further review showed that Resident #1 was not listed on the admission and discharge log.

A review of Residents' #9, #10 and #11 records revealed that there was no documentation of a completed health assessment.

On at 11:00 AM, the Administrator stated that had been sick, which was why the files did not have the health assessments for Residents #9, #10 and #11.

Class III

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on record review and interview, the facility failed to appoint a Manager.

Findings included:

A review of the Facility Provider Locator Database showed the Administrator managed 2 facilities.

A review of facility and employee records revealed a Manager had not been appointed.

On at 11:00 AM, the Administrator stated that Staff B was the Manager, but did not have her documents on file.

Class III

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

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

Findings included:

On . . . . . at 11:00 AM, observed Staff C, D and E caring for residents and providing personal services to them.

On at 11:00 AM, observed the staff schedule was missing from the board were all the other licenses and permits were posted.

On . . . . . at 12:00 noon the Administrator stated by phone, that she could not do the staffing schedule because she was sick for the last year, and was currently hospitalized.

Class III

0081 - Training - Staff In-Service - 58A-5.0191(2) FAC

Based on observation, record review and interview, the facility failed to ensure that three out of 5 sampled employees (Staff C, D and E) had received several required trainings prior to provide any personal/direct care to residents.

Findings included:

On at 11:00 a.m. Staff C, D and E were observed taking care of the residents.

A review of the personnel records showed the facility did not keep any documentation for Staff C , D and E (unknown hire date).

On . . . . . at 11:30 AM, the Administrator stated that Staff C, D and E had all the trainings but their records were in her house.

Class III

0090 - Training - - 58A-5.0191(11) FAC

Based on record review, and interview, the facility failed ensure 3 out of 5 direct care Staff (C, D and E) ,

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receive at least one hour of training in the facility ' s policy and procedures regarding . . . . . (. . . .) within 30 days after employment.

Findings included:

Staff record review revealed that there was no documentation of . training for Staff C , D and E (unknown hire date).

On at 11:45 AM the Administrator stated that staff had all the trainings but had their records in her house.

Class III

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

Based on record review and interview the facility failed to have an up-to-date admission and discharge log. One of 11 residents was not listed (Resident #11).

Findings as follow:

A review of the admission and discharge log showed that Resident #11 was not listed.

On the Administrator stated (by phone) did not have an updated admission and discharge log because she had been sick for about a year.

Class III

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

Based on record review and interview, the facility failed to have records which included demographic data, health assessments, orders for medications, weight record initiated on admission, and a residency contract for 3 out of 11 sampled residents (Residents #9, #10 and #11).

Findings as follow:

Record review showed that there were no records for Residents #9, #10 and # 11.

On . . . . at 12:10 p.m. the Administrator stated she had been sick.

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Class III

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Z813 - Results of Screening & Notification In File - 59A-35.090(3)(c), FAC

Based on observation, record review and interview, the facility failed to have documentation of an eligible Level 2 Background Screening for 3 out of 5 sampled staff (Staff C and D).

Findings:

On . . . . . at 11:00 a.m. Staff C and D were observed assisting residents with Activities of Daily Living.

A review of personnel records showed that there was no documentation of an eligible level 2 background screening result for Staff C and D.

On . . . . . at 12:10 p.m. the Administrator stated Staff C and D had an eligible Level 2 background screening, but that she had proof of it at home.

Unclassified

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

Based on observation, record review and interview, the facility failed to maintain an updated roster of employees within the Background Screening Clearinghouse database. Three out of five sampled staff were not listed (Staff C, D and E). The facility also failed to remove listings for 5 staff that no longer work at the facility.

Finding included:

On . . . . . at 11:00 a.m. Staff C, D and E were observed assisting residents with Activities of Daily Living.

A review of the Background Screening Clearinghouse database showed Staff C, D and E (unknown hire date) were not registered on the roster and staff F, G, H, I and J were still in the roster as facility employees.

On at 12:00 PM the Administrator stated that Staff F, G, H, I and J did not work there anymore. She stated that she could not update the roster because she had been sick and was hospitalized at the present time.

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Unclassified

Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on observation, record review and staff interview the facility failed to ensure that 1 out of 5 sampled staff (Staff E) member had an eligible level 2 background screening prior to providing care to residents..

Findings included:

On at 11:00 a.m. Staff E was observed in facility assisting residents with the ADLs.

A review of personnel records revealed that Staff E (unknown hire date), did not have a current eligible Level II background screening.

On at 12:00 PM the Administrator stated (through phone call) Staff E had the Level 2 background screening.

Unclassified