STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11943057	R 10/08/2017
NAME OF PROVIDER OR SUPPLIER **MY SWEET HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **11312 SW 203 TERRACE** **MIAMI, FL 33189**	

SUMMARY STATEMENT OF DEFICIENCIES
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0000 - Initial Comments

A standard biennial revisit survey was conducted on , , 2017 and concluded on 8th, 2017. My Sweet Home with limited nursing services component and license #8528 had the following deficiencies identified 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 Assisted Living Facility failed to have a health assessment (AHCA form 1823) completed by licensed physician, a licensed physician assistant, or a licensed nurse practitioner within 30 days of admission for one out of six sampled residents (Resident #6).

Findings included:

Review of Resident #6's record revealed that the resident was admitted to the facility on . Record review also revealed that there was no health assessment available for review for Resident #6.

In an interview on at 8:45 AM Staff D revealed that everything was disorganized because they evacuated during the storm.

Class III
Uncorrected

0052 - Medication - Assistance with Self-Admin - 58A-5.0185 (3)

Based on observation and interview, the Assisted Living Facility failed to follow the correct procedure when assisting two out of six sampled residents with self-administration of medications (Residents #2 and #6)

Finding included:

Observation on at 7:28 AM revealed Staff F place a tablet in a small disposable cup. Staff F initialed the Medication Observation Record (MOR) for , 81 mg tablet by mouth once daily. Staff F returned medication box to the closet and locked it.

On at 7:30 AM Staff F stated, "Resident #2 looked your medicine tablet."

Further observations on at 7:40 AM revealed Staff F placed a tablet in a small disposable cup. Staff F initialed the Medication Observation Record (MOR) for , HR 10 mg tablet by mouth

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once daily. Staff F went to Resident #6 and stated, "Your pill, ..." Resident #6 requested all the medicines together. Staff F put in total three tablets in a small disposable cup.

On . . . . at 7:44 AM Staff F initialed the MORs for Resident #6

On . . . . at 7:45 AM Staff F stated, "Here are your medicines."

Class III
Uncorrected

0058 - Pharmacy & Dietary; Uncorrected Deficiencies - 429.42(1-2) FS; 58A-5.033(3)(a) FAC

Based on observation and interview, the Assisted Living Facility failed to ensure that staff received training in assistance with medications for two out of seven sampled residents (#2 and #6). Based on the above non-compliance the facility shall be required to employ the consultant services of a licensed pharmacist or a licensed registered nurse.

Findings included:

Observation on . . . . at 7:28 AM revealed Staff F place a tablet in a small disposable cup. Staff F initialed the Medication Observation Record (MOR) for , 81 mg tablet by mouth once daily. Staff F returned medication box to the closet and locked it.

On . . . . at 7:30 AM Staff F stated, "Resident #2 looked your medicine tablet."

Further observations on . . . . at 7:40 AM revealed Staff F placed a tablet in a small disposable cup. Staff F initialed the Medication Observation Record (MOR) for , HR 10 mg tablet by mouth once daily. Staff F went to Resident #6 and stated, "Your pill, ..." Resident #6 requested all the medicines together. Staff F put in total three tablets in a small disposable cup.

On at 7:44 AM Staff F initialed the MORs for Resident #6

On at 7:45 AM Staff F stated, "Here are your medicines."

Class III

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review and interview, the Assisted Living Facility failed to provide documentation of a

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negative examination required on an annual basis or a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable for four out of eight sampled staff (Staff B, C, E, and F).

Findings included:

Review of Staff C's record revealed that Staff's hire date was on . There was no documentation of a negative examination and a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable .

In an interview on at 9:33 AM Staff D revealed that Staff C did not have it.

Staff F did not have a record in the facility at the time of the survey. There was no documentation of a negative examination and a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable .

In an interview on at 9:38 AM Staff D revealed that Staff F's record was at the other facility.

Review of Staff C's record revealed that Staff's hire date was on . The documentation of a negative examination and that did not have any signs or symptoms of communicable showed .

On , the facility emailed a copy of the negative results for Staff D and F.

Record review found the facility did not provide a copy of the negative results for Staff B and E. The facility's background screening's employee roster showed both staff members were employed by the ALF as of .

Class III
Uncorrected

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

Based on observation, record review, and interview, the Assisted Living Facility failed to maintain accurate written work schedule that reflects its 24-hour staffing pattern for a given time period.

Findings included:

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Observation on at 7:00 AM revealed that Staff F took care of six residents and one day care resident.

Review of staffing schedule for 2017 revealed that on from 7 AM to 7 PM Staff B, from 9 AM to 6 PM Staff H. Staff F was in schedule for working Saturdays and Sunday from 7 AM to 7 AM.

In an interview on at 7:05 AM Staff F revealed that a family member of a staff and there were some changes in the schedule.

Class III

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

Based on record review and interview, the Assisted Living Facility failed to ensure that two out of eight sampled staff had received training in the areas of activities of daily living (ADLs) and Behavioral Needs, Elopement Response, Incident Reporting, (Staff C and H), and one out of eight sampled staff had received training in the areas of Resident Rights, Recognizing , Neglect, and , Emergency Preparedness, Nutritional & Safe Food Handling (Staff C).

Findings included:

A record review of Staff C's employee file revealed the staff was hired on and did not have documentation of the required training in the areas of ADLs and Behavioral Needs, Elopement Response, Emergency Preparedness Evacuation, Incident Reporting, Resident Rights, Recognizing , Neglect, and , Nutritional & Safe Food Handling.

In an interview on at 9:28 AM Staff D revealed that Staff C did not have those training yet.

A record review of Staff H's employee file revealed the staff was hired on and did not have documentation of the required training in the areas of ADLs and Behavioral Needs, Elopement Response, Emergency Preparedness Evacuation, Incident Reporting, Resident Rights.

In an interview on at 9:28 AM Staff D revealed "I don't see them."

Class III
Uncorrected

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0083 - Training - First Aid and - 58A-5.0191(4) FAC

Based on observation, record review, and interview, the Assisted Living Facility failed to ensure that at least one staff member was present with the residents who had First Aid and training at all times.

Findings included:

Observation on at 7:00 AM revealed Staff F was in the facility with a census of six residents.

Staff F did not have a record in the facility at the time of the survey. Staff F did not hold a valid First Aid and card.

In an interview on at 9:39 AM Staff F stated, "I left it in my record in the other facility."

Class III
Uncorrected

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

Based on record review and interview, the Assisted Living Facility failed to provide documentation that one out of eight sampled staff received the required training in assisting residents with self-administration of medications (Staff F).

Findings included:

Observation on at 7:28 AM revealed Staff F assisted Resident #2 with self-administration of medications.

Observation on at 7:40 AM revealed Staff F assisted Resident #6 with self-administration of medications.

Staff F did not have a record in the facility at the time of the survey. Staff F did not the required training in assisting residents with self- administration of medications

In an interview on at 9:39 AM Staff F stated, "I left it in my record in the other facility."

Class III
Uncorrected

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

Based on record review and interview, the Assisted Living Facility failed to ensure that one out of eight sampled staff had training in ( ) within 30 days of employment (Staff C and H).

Findings included:

A record review of Staff C's employee file revealed the staff was hired on and did not have documentation proving Staff C received training.

In an interview on at 9:28 AM Staff D revealed that Staff C did not have the training yet.

A record review of Staff H's employee file revealed the staff was hired on and did not have documentation proving Staff C received training.

In an interview on at 9:28 AM Staff D revealed "I don't see them."

Class III
Uncorrected

0127 - Fiscal - Liability Insurance - 429.275 (3) FS; 58A-5.021(4) FAC

Based on record review and interview, the Assisted Living Facility failed to have liability insurance at all times.

Findings included:

Review of facility's record revealed that there was no proof of liability insurance at the time of the survey.

In an interview on at 9:51 AM Staff D revealed that did not find the insurance.

Class III
Uncorrected

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on observation, record review, and interview, the Assisted Living Facility failed to have completed employee record onsite during survey for one out of eight sampled staff (F).

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Findings included:

Observation on . . . . at 7:00 AM revealed Staff F was in the facility with a census of six residents.

Observation on . . . . at 7:28 AM revealed that Staff F assisted Resident #2 with self-administration of medications.

Observation on at 7:40 AM revealed that Staff F assisted Resident #6 with self-administration of medications.

Staff F did not have a record in the facility at the time of the survey.

In an interview on . . . . at 9:38 AM the Staff D revealed that Staff F's record was at the other facility.

Class III
Uncorrected

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

Based on record review and interview, the Assisted Living Facility failed to have documentation of the appointment of a health care surrogate, health care proxy, guardian, or the existence of a power of attorney for one out of six sampled residents (Residents #1 and #3).

Findings included:

Record review of Resident #3's file revealed that the contract had been signed by the sister. Record review also revealed that there was no document appointing as the resident's representative.

In an interview on . . . . at 10:40 AM Staff D revealed that did not find documentation of Resident #3's legal representatives.

Class III
Uncorrected

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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 Assisted Living Facility failed to maintain eligibility results of employee background screening and the signed attestation of compliance with background screening results on site in the facility's personnel files for one out of eight sampled staff (F).

Findings included:

Observation on at 7:00 AM revealed Staff F was in the facility with a census of six residents.

Observation on at 7:28 AM revealed that Staff F assisted Resident #2 with self-administration of medications. Observation on at 7:40 AM revealed that Staff F assisted Resident #6 with self-administration of medications.

Staff F did not have a record in the facility at the time of the survey. There was no proof of eligibility results of employee background screening and no signed attestation of compliance with background screening in record at the time of the survey.

In an interview on at 9:38 AM the Staff D revealed that Staff F's record was at the other facility.

Review of the background screening database revealed a Level II background screening for Staff F dated .

Unclassified

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

Based on record review and interview, the Assisted Living Facility failed to maintain the employment status of all employees within the clearinghouse and any changes in status must be reported within 10 business days.

Findings included:

Review Background screening database for providers showed that center's employee roster had Staff B as an active employee. Staff H was not included in the employee roster.

Review of Staff H record revealed that hire date was on .

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In an interview on at 8:23 AM, Staff D revealed that Staff B stopped working in the facility about a month ago.

Unclassified