STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11943141	R 11/08/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ELZAIDA'S TENDER CARE	**804 SOUTH BELCHER ROAD** **CLEARWATER, FL 33764**

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

0000 - Initial Comments

Assisted Living Facility

A 2nd Revisit to the 10/11/16 & 6/20/17 complaint surveys, (CCR# 2016010743 & CCR# 2016010592), was conducted on 11/08/17, at Elzaida's Tender Care. Elzaida's Tender Care, Assisted Living Facility, had an uncorrected deficiency identified during the revisit. Additional deficiencies were identified during the visit.

(License # 7280)

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

Based on record review and interview the facility failed to provide daily observation and a general awareness of the general health, safety, and physical and emotional well-being for 1 of 8 residents (#5) who required daily physician ordered medications. Additionally, the facility failed to notify Resident #5's case manager when they eloped from the facility.

Findings included:

An interview was conducted with the Owner on at 11:20 am. The Owner stated, "She (Resident #5) left the other day (Sunday,) about 7:00 pm. The hospital called me on Tuesday ( ) but I was not here and said they had her. They called me yesterday and said they her and are keeping her for a while for observation. She always leaves and goes to her boyfriend's. She usually tells me when she is staying the night out. She did not tell me. I did not call her case manager. She did not take her medicine with her. She did not tell me she was leaving."
At 11:49 am on the Owner stated, "We do not have an elopement policy. They know not to leave."

On a record review was conducted for Resident #5. Resident #5's record included an 1823 Health Assessment form dated . The 1823 revealed Resident #5 had a diagnosis of and required the following medications: Carb 300 mg cap take 1 capsule by mouth three times daily (8 am, 12pm, 5pm) (mood-stabilizing agent indicated for the treatment of episodes and as maintenance treatment for 1 due to the importance of having the right

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amount of in your body)
2 mg tab take 1 tablet by mouth twice daily (8 am and 8 pm) (used for the side effects of monthly injections), /ml 5X1M inject 1 ml every 28 days (for mood .)

On at 1:06 pm, an interview was conducted with Resident #5's case manager. The case manger stated he was not notified when Resident #5 did not return to the facility. The hospital called him to let him know she was admitted to the hospital. He was told by the hospital social worker that Resident #5 was due to being found walking up and down the street yelling that she was .

He stated Resident #5 was and unpredictable. She is "basically harmless to others", but the case manager is unaware if she is actively . She is due for her injection for mood . He was unaware that she had a boyfriend that she spends the night with.
He stated he would be following up with the hospital regarding her condition and with the facility Owner regarding the continuance of her care.

Class III

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

Based on record review and interview the facility failed to ensure the facility was under the supervision of an Administrator who has successfully completed the CORE training and CORE competency test requirements no later than 90 days after becoming employed as an Administrator.

Findings included:

A record review was conducted for the Administrator on 11/ . The Administrator had a hire date of . The Administrator's record did not include any documentation of successfully completing CORE training.

On at 9:49 am an interview was conducted with the Owner and she was asked if the Administrator had completed CORE training. The Owner stated, "Yes, she has CORE training." "It's not in her folder?"

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Class III

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

Based on record review, observation and interview the facility failed to maintain the required minimum amount of direct care staffing hours with a census of eight residents (#1-8.)

Findings included:

On a review of the facility direct care staffing schedule was conducted. It revealed the facility had 207 scheduled direct care staffing hours. With a census of 8 the facility is required to maintain 212 direct care staffing hours.

On during the hours of 9:00 am and 1:00 PM the Owner was the only employee observed working in the facility, although the staffing schedule revealed the Administrator was scheduled to work on from 8:30 am-1:30 PM.

On beginning at 10:52 AM, resident interviews were conducted. When asked if anyone other than the Owner worked in the facility and provided care for them the following statements were given:
At 10:54 am Resident #7 stated, "No, no one else works here."
At 10:52 am Resident #4 stated, " It is always the Owner, except Resident #9 who cleans."
At 10:56 am Resident #3 stated, "I don't think anyone else works here."
At 10:58 am Resident #6 stated, "I don't think anyone else works here."

On an interview was conducted with the Owner. The Owner stated, "I don't have any other employees." "Resident #9 cleans." "Can't I put her on the schedule?"

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 submit an adverse incident report for one (#5) resident who eloped and was at risk of harm or injury due to not having their physician ordered medications for a period of approximately 2 days.

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Findings included:

A review of the facility records was conducted on 11/ . The records did not include an adverse incident report for Resident #5, who was found to have eloped on and was transported by the local police department to a local hospital. Resident #5 was admitted to the local hospital under a due to being at risk of harming themselves.

An interview was conducted with the Owner on at 11:20 am. The Owner stated they did not submit an adverse incident report for Resident #5. The Owner stated Resident #5 always spends the night with their boyfriend and she assumed that's where they were. The Owner stated Resident # 5 did not take their physician ordered medications with them. The Owner stated the facility did not have an elopement policy.

Class III