STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966416	10/26/2017
NAME OF PROVIDER OR SUPPLIER **REBECCA'S HOUSE**	STREET ADDRESS, CITY, STATE, ZIP CODE **6711 NW 46TH COURT** **LAUDERHILL, FL 33319**	

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

0000 - Initial Comments

An unannounced licensure complaint survey, CCR#2017007493, was conducted on through at Rebecca's House, License #10610. The facility had deficiencies at the time of the survey.

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

Based on records review and interview, the facility failed to maintain an accurate medication observation record (MOR), for 2 of 6 sampled residents (Resident # 2 & 3).

The findings included:

During observation conducted at the facility on at 12:00 PM, it was noted that the facility had inaccurate MORs for Residents # 2 and #3. The signatures on the MORs of Resident #2 and #3 was the for the 24th of , 2017. After counting the signatures on the record, there was no indication that any days had missing signature. However, there was a signature for evey day except that the record was updated a day in advance.
Review of Resident #2's and #3's medications list indicated that the medication for which the facility signed ahead of time were supposed to be administered daily.

During a follow-up interview with the Administrator on at 11:30 AM, following the observation, she acknowledged the findings but stated that this was definitely a mistake.

Class III

0056 - Medication - Labeling and Orders - 58A-5.0185(7) FAC

Based on observation, records review, and interview, the facility failed to return 1 of 3 discharged residents' (Resident #7) medications to the resident's family member or guardian within 15 days of discharge and failed to dispose of them within 30 days. Additionally, the facility failed to avoid intermingling of 3 of 8 residents' medications by keeping them in separate containers (Residents # 1, 2, &7).

The findings included:

Review of the Admission and discharge log, documented that Resident #7 was recenthly discharged

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from the facility. Resident #7 who was admitted to the facility on an unidentified date per record review had , as noted in the record but there was no date of expiration. During a subsequent interview with the Administrator on at 11:30 AM, she confirmed that Residents 7 had , , in , 2017. She stated that Resident #7 was a respite resident and that she did not keep any record for that resident. She also admitted to having not returned the residents' medications to their family or destroyed them.

Furthermore, medications belonging to Residents #1, 2, 3, and 7 were intermingled. Surveyor observed a bottle of medication belonging to Resident #1 in the bag of medications belonging to Resident #9 and medications belonging to Resident #3 was in the bag of Resident #7.

The Administrator agreed with the findings and indicated that she will solve the problem immediately.

Class III

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

Based on record review and interview, the Administrator failed to maintain on the premises 2 of 3 requested sampled residents' records (Residents #8 & #9).

The findings inluded:

Review of the admission Transfer and discharge records revealed that Resident #8 was admitted to the facility on and discharged on . The Administrator was not able to provide copy of the contract for the discharged resident.

During a record review, it was noted that resident #9 was admitted to the facility on and expired on . This infomation was verified in the Adminission Transfer Discharge record.

Upon request of Residednt #8 and #9's file, the Administrator on at 11:00 AM, reported that she was unable to locate Resident #8 and #9's record. She was unable to provide the residents' health assessment record, records and contracts.

Class III

0167 - Resident Contracts - 58A-5.025 FAC

Based on record review and interview, it was determined that the facility failed to ensure a refund was

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SUMMARY STATEMENT OF DEFICIENCIES
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issued in a timely manner for 1 out of 3 discharged residents (Resident #9).

The findings include:

Review of the facility's Admission and Discharge record revealed that Resident #9 was admitted to the facility on and expired on . Further record review revealed the resident was admitted to the hospice facility on , 2017 due to a significant health change and higher level of care requirements. Resident #9's rental of $1500 was paid as required for , 2017. The resident never returned to the facility and expired on , 2017.

Upon request of Resident #9's record, including the rental agreement ; Administrator was unable to locate. However, during an interview with the Administrator on at 1 PM, she confirmed the resident had paid the , 2017 rental and that the deposit refund of $1000 had also be paid prior to move-in. She also acknowledged that she had not returned the required prorated rental and refund to the legal guardian and/or next of kin. She acknowledged that she had returned only $500. However, she was not able to provide any documentation indicating how she determined the resident was only due $500 since the resident was transferred out to a higher level of care on , 2017 and never returned to the facility.

During an exit interview with the Administrator on and , she agreed that Resident #9's legal representative was due a refund for prorated rent for , 2017 (total minus 3 days) and the security deposit. She stated that she would issue the refund immediately.

Class III