STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967151	**11/22/2017**
NAME OF PROVIDER OR SUPPLIER **GOLDEN TOUCH HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **41 NW 190 STREET** **MIAMI, FL 33169**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on 11/ . Golden Touch Home Care (License #11212) with limited mental health component had the following deficiencies identified at the time of the survey:

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

Based on observation, record review and interview the facility failed to ensure the medication log was maintained for one out of six (#4) sampled residents.

Findings included:

A review of the medication observation record for Resident #4 found 10 mg softgel for 2 PM was not initialed for the 7 AM medications from to . Reconciliation of the medication packs found the medication tablets were missing the for Resident #4 from to . On at 1:15 PM, observed Staff E initial the medication log for all of these dates after giving the 2 PM medication to Resident #4.

On at 1:30 PM with Staff E stated, "I just forgot to initial the log."

Class III

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interview the facility failed to maintain a safe living environment.

Findings included:

Observations made on at 9:00 AM at arrival a blue tarp was found on top of the facility roof. # the grab bar was loose. In # the vanity in the peeling paint and there was discoloration from a leak in 's ceiling. In the back yard of the facility against the wall was found a mattress and rails. (photos taken).

Interview on at 4:00 PM with Staff A stated, "There was a leak we fixed it. We are getting the roof fixed. I will get it fixed by the time you come back."

Class III

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

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

Based on record review and interview, the facility failed to provide documentation of an updated sanitation inspection report issued by the county health department.

Findings included:

Observation made on at 9:02 am found the sanitation inspection report issued by the county health department posted on the wall was dated . . . . . expired on . . . .

Interviewed on at 11:00 AM, the Administrator stated, "They did it but I never received it yet . "

Class III

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

Based on record review and interview the facility failed to have weights recorded semi-annually for two out of six sampled residents who needed assistance with the activities of daily living (Residents #3 and 4).

Findings Included:

Record review showed the facility failed to have weights initiated at admission and continuing every six months for Resident #3 and 4. Resident #3 was admitted on and Resident #4 was admitted on . . . . . .

Interviewed on at 4:00 PM, Staff E acknowledged the facility did not document the weights semi annually".

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIER **GOLDEN TOUCH HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **41 NW 190 STREET** **MIAMI, FL 33169**	

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

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

Based on record review and interview the facility failed to have updated eligible level II background screening record for one out of five sampled staff (#B).

Findings included:

A review of Staff B's personnel record (hired . . . .) showed a level II background screening dated and the background screening clearinghouse database showed that the employee had another screen dated , and the result was eligible eligible. Documentation of the current eligible screening was not in Staff B's file.

Interviewed on at 4:00 PM, Staff E acknowledged that the documentation of the background screening update was was not in the personnel record.

Unclassified