STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953486	**12/11/2017**
NAME OF PROVIDER OR SUPPLIER **NORITA ADULT FAMILY CARE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **11971 SW 118 STREET** **MIAMI, FL 33186**	

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

0000 - Initial Comments

A standard biennial survey was conducted on , 2017 and concluded on , 2017. Norita Adult Family Care, Inc. with Limited Nursing Services and Limited Mental Health components, license #8591, had the following deficiencies identified at the time of the survey:

0007 - Admissions - Criteria - 429.26(11) FS; 58A-5.0181(1) FAC

Based on record review and observation, the Assisted Living Facility failed to ensure that one out of five sampled residents (#1) met admission criteria.

Findings included:

Review of Resident #1's record revealed the Health Assessment (AHCA form 1823) completed on showed the resident needed total care for all activities of daily living. Record review revealed Resident #1 was admitted to the facility on .

Observation on at 12:53 PM revealed Resident #1 drank and ate with the assistance of one staff. At 1:22 PM Resident #1 transferred with assistance of one staff.

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

Based on record review and observation, the Assisted Living Facility failed to have an accurate health assessment that showed the actual resident's health condition for one out of five sampled residents (#1).

Findings included:

Review of Resident #1's record revealed the Health Assessment (AHCA form 1823) completed on showed the resident needed total care for all activities of daily living. It showed the resident received hospice services but did not include the admission diagnosis to hospice. The weight and height sections were blank.

Observation on at 12:53 PM revealed Resident #1 drank and ate with the assistance of one staff. At 1:22 PM Resident #1 transferred with assistance of one staff.

Class III

0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC

Based on record review and interview, the Assisted Living Facility failed to complete two elopement drills

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per year.

Findings included:

Review of facility's records revealed the facility had one elopement drill completed on . The facility did not have any other documentation of elopement drills.

In an interview on at 9:47 AM Staff B stated, "I probably erased, to use the paper because I did not have paper." At 9:53 AM stated, "I did the assessments on but I don't find the drill for that date."

Class III

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

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

Findings included:

Observations on at 9:15 AM revealed that Staff B and D were on duty taking care of five residents.

Review of facility's record revealed the 2017 Staffing Pattern was posted in the bulletin board in the dining it showed that Staff B was scheduled to work on from 7 PM to 7 AM, and Administrator was scheduled to work on from 7 AM to 7 PM. Staff D was not in the written work schedule.

Class III

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 ensure that one out of five sampled staff members (Staff D) who provided assistance with self-administered medications successfully completed the initial 4 hour training.

Findings included:

Staff D stated, "I help them with medicines in the morning and evening."

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Review of Staff D's personnel file revealed the only LMH training in record was for 8 hours on .

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(6) FAC

Based on observation and record review, the Assisted Living Facility failed to ensure that the person designated by the Administrator as responsible for the facility's food service and the day-to-day supervision of food service staff must obtain, annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility.

Findings included:

Observation on at 11:17 AM revealed Staff D prepared lunch for the residents. At 12:09 PM Staff D served lunch to the residents.

Review of Staff D's personnel record revealed the facility did not have evidence of a completed 2 hours continuing education training in topics pertinent to nutrition and food service in an assisted living facility.

Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on observation and record review, the Assisted Living Facility failed to note substitutions before or when the meal is served.

Findings included:

Observation on at 12:09 PM Staff D served lunch to Residents #4 and #5: white rice, sweet potato, carrots, mixed salad, fried chicken, , soup, and apple/pear.

Review of menu showed that original menu had roasted chicken (4 oz.), sweet potato (1 cup), carrots (1/2 cup), mixed salad (1 cup), dressing (1 T), and fruit cocktail (1/2 cup).

The facility failed to note substitutions before or when the meal is served on the menu.

Class III

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

Based on record review and interview, the Assisted Living Facility failed to have personnel records for two out of five sampled staff (Staff C and E).

Findings included:

Review of the background screening database for providers showed the Assisted Living Facility 's employee roster showed Staff C with a hire date of and Staff E with a hire date of 11/ . Record review revealed the facility did not have completed personnel records for Staff C and Staff E which included an application with references, training documentation, and background screening.

In an interview on at 11:03 AM Staff B revealed Staff C has a record but Staff B did not find the record.

In an interview on at 11:26 AM Staff B stated, "Staff E just worked one day, Staff E never came back to work again. The only time she came was the date it showed."

Class III

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

Based on record review and interview, the Assisted Living Facility failed to weight residents who needed assistance with the activities of daily living at admission to the facility and semi-annually for two (#1 and #2) out of five sampled residents.

Findings included:

Review of Resident #1's record revealed the health assessment (AHCA form 1823) completed on showed the resident needed total care for all activities of daily living. The facility did not have weight records for Resident #1 at admission on .

Review of Resident #2's record revealed the health assessment (AHCA form 1823) completed on showed the resident needed total care for all activities of daily living except for eating which required assistance. Resident #2's last weight was on and there was a note that stated in Spanish "I cannot put the resident alone in the scale."

In an interview on at 12:28 PM Staff B revealed that facility did not complete the weigh log for Resident #1 because Resident #1 was not six months yet in the facility.

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Class III

0165 - Risk Mgmt & QA; Adverse Incident Report - 429.23(1-4 & 6-10) FS; 58A-5.0241 FAC

Based on observation, record review, and interview, the Assisted Living Facility failed to submit the incident report within one business day after the incident and within 15 days of the incident to AHCA when resident condition required them to be transported to a unit providing more acute care due a for one (#2) out of six sampled residents.

Findings included:

Observation on at 9:16 AM revealed Resident #2 rested in bed and had a on the right leg.

In an interview on at 9:17 AM Staff B stated, "Resident #2 the day before the hurricane her foot."

Review of Resident #2's progress note revealed on at 9:30 AM facility sent the resident to the hospital. Resident #2 and hurt right leg. Resident woke up in the middle of the night and slipped. On returned to facility after the rehabilitation center and the hospital for a in the leg.

In an interview on at 1:00 PM Staff B revealed Staff B wrote that Resident #2 but Staff B found in the floor. Resident #2 did not complaint of pain. "We called the family and they said that if she was ok to do not send her out. That day they did not call emergency services until next day when Resident complained of pain."

In an interview on at 1:03 PM Staff B revealed the facility did not file an incident report within one business day after the incident and within 15 days of the incident to AHCA.

Class III

L243 - LMH - Training - 429.075(1) FS; 58A-5.0191(8) FAC

Based on record review and interview, the Assisted Living Facility failed to ensure that three out of five sampled staff members (Staff A, B, and D) completed a minimum of 3 hours of continuing education related to Limited Mental Health (LMH) training.

Findings included:

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Review of Staff A's personnel file revealed the last 3 hours LMH training was on .

Review of Staff B's personnel file revealed the last 3 hours LMH training was on .

Review of Staff D's personnel file revealed the only LMH training in record was for 8 hours on .

In an interview on at 11:50 AM Staff B stated, "I will look for them, I know we have them." (LMH training)

Class III

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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 of the background screening database for providers showed the Assisted Living Facility's employee roster showed Staff C with a hire date of and Staff E with a hire date of 11/ .

In an interview on at 11:03 AM Staff B revealed Staff C has a record but Staff B did not find the record.

In an interview on at 11:26 AM Staff B stated, "Staff E just worked one day, Staff E never came back to work again. The only time she came was the date it showed."

In an interview on at 11:49 AM Staff B revealed that Staff C will be removed from the Staff list and will be added when all documentation is ready.

Unclassified