STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967287	**01/31/2018**
NAME OF PROVIDER OR SUPPLIER **FAMILY FIRST ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **15600 SW 143 AVENUE** **MIAMI, FL 33177**	

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

0000 - Initial Comments

A standard biennial survey was conducted on . . . . . Family First ALF Inc.with Limited Mental Health component license #11365 had the following deficiencies found at the time of the survey:

0009 - Admissions - Admission Package - 58A-5.0181(3) FAC; 400.0078(2)

Based on record review and interview the Assisted Living Facility failed to have resident's contract signed for one out of six sampled residents (#6).

Findings include:

A review of Resident #6's record revealed that the resident was admitted on . . . . . The residential contract, smoking policies and procedures, exit policy, rights as a resident to choose your health care provider, consent to release personal information, policy on reporting Medicaid fraud, refusal to follow therapeutic diet, bed hold policy, beneficiary designation form, acknowledgement of statement, storage of valuables policy, facility policies, emergency contact, conflict of interest policy, ... & advance directives policy were not signed.

On at 12:00 PM owner stated that they had been calling the son to come and sign the contract with the power of attorney but he had not come yet.

Class III

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

Based on record review and interview the facility failed to ensure the Medication Observation Records (MORs) were signed after each medication administration for two of six sampled residents (#1 and 3).

Findings included:

On . . . . . at 7:55 AM, Staff C was assisting with self-administration of medication and was asked if she had finished passing the medications and she stated "Yes, I am done."

A review of the medication observation record revealed that the medications were not on the MOR.

On at 8:00 AM Staff C stated that Resident #3 was admitted the night before and Resident #1

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was admitted on , and that this was the reason why no MOR was in the facility.

Class III

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

Based on record review and interview, the facility failed to provide documentation of a negative statement on an annual basis for one out of four sampled staff (Staff C).

Findings included:

Record review reveled that staff C had been hired on and that there was no statement in her file.

On at 11:05 AM, the Administrator stated that she was going to have Staff C get the test done that week.

Class III

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

Based on observation, record review and interview the facility failed to have a new health assessment completed after a significant change for one out of six sampled residents (Residents # 6).

Findings included:

Record review of Resident # 6 revealed that the resident was receiving hospice services. The last health assessment was completed on and stated that the resident required assistance with all activities of daily living (ADL) and assistance with self-administration of medications.

On at 7:41 AM the nurse from hospice stated that Resident # 6 was able to assist with self-administration of medications.

On at 11:05 AM caregiver C gave some juice to resident and it was observed that resident needed more than help to drink it.

On at 11:05 AM caregiver C stated that sometimes residents required assistance with feeding and transferring and total assistance with the rest of his ADL.

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Class III