STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966064	**01/31/2018**
NAME OF PROVIDER OR SUPPLIER **GUARDIAN ELDER CARE SERVICES,**	STREET ADDRESS, CITY, STATE, ZIP CODE **8318 SW 162 PLACE** **MIAMI, FL 33193**	

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

0000 - Initial Comments

A Complaint Survey (CCR 2017014008) was conducted on . . . . . Guardian Elder Care Services Inc (The), license # 10322, had the following deficiencies identified at the time of the survey:

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

Based on observation, record review and interview the facility failed to maintain a Staffing schedule showing the minimum staffing hours per week.

Findings:

On . . . . . at 9:45 a.m. Staff B, C and D were observed working in facility.

Record review showed the last staffing schedule was for the week ending on . . . .

On . . . . . at 10:00 a.m. Staff B stated the facility had no update schedule because they were waiting for the consultant to do the schedule.

Class III

0081 - Training - Staff In-Service - 58A-5.0191(2) FAC

Based on observation, record review and interview the facility failed to have 1 out of 6 trained in resident rights in an assisted living facility, recognizing and reporting resident , neglect, and , ... , and resident behavior and needs (Staff D).

Findings:

On . . . . . at 9:45 a.m. Staff D was observed assisting residents with the activities of daily living.

A review of the personnel record showed that there was no documentation of the resident rights in an assisted living facility, recognizing and reporting resident , neglect, and , and resident behavior and needs trainings for Staff D.

On . . . . . at 11:00 a.m. the Administrator stated Staff D had the trainings but documentation could be misplaced.

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Class III

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(5) FAC

Based on record review and interview, the facility failed to have documentation that 2 out of 6 staff were trained in assisting residents with self administration of medications (Staff C and F) .

Findings:

A review of personnel files showed that there was no documentation of 4 hours training in assistance with self administration of medications training for Staff C and F.

On at 11:00 a.m. the Administrator stated staff had the trainings but documentation could be misplaced.

Class III

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

Based on observation, record review and interview, the facility failed to have an employment application for 1 out of 6 staff (Staff D).

Findings as follow:

On at 9:45 Staff D was observed assisting residents with the activities of daily living.

Personnel record review showed Staff D 's record had no employment application.

On at 11:20 a.m. Staff D stated se had been working there for 2 months and realized that she had not complete an application for employment.

Class III

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

Based on observation, record review and interview the facility failed to provide documentation of a

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SUMMARY STATEMENT OF DEFICIENCIES
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prescription for bedrails for 1 out of 6 sampled residents (Resident #2).

Findings:

On at 9:45 a.m., observed the bed of Resident #2 had full bedrails attached to the bed. Resident was observed sitting in the living .

A review of Resident #2's record showed that the resident had no prescription for the use of full bedrails. The resident was not in Hospice care.

On at 9:45 a.m. Staff B stated they use the bedrails for Resident #2 to avoid a .

Class III

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

Based on record review and interview, the facility failed to have the a signed attestation of Compliance with the background screening for 2 out of 6 sampled staff (Staff C and D).

Findings:

A review of the personnel record showed that there was no Attestation of Compliance With Background Screening for Staff C (hired on) and D (hired 2 months ago).

On at 11:00 a.m. the Administrator stated she would have those forms signed by staff immediately.

Class III

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on observation, record review and interview the facility failed maintain an updated employee roster in the Background Screening Clearinghouse Database. Staff D and E were not listed.

Findings:

On at 9:45 a.m. Staff D was observed assisting residents with the activities of daily living.

A review of the Background Screening Clearinghouse Database showed that Staff D and E were not listed.

On at 11:00 a.m. the Administrator stated she had to update the facility Roster.

Unclassified