STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964722	**03/08/2018**
NAME OF PROVIDER OR SUPPLIER **LILI'S HOME CARE CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **6321 SW 20TH TERRACE** **MIAMI, FL 33155**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on . . . . Lili's Home Care Corp. License #9272 with Limited Mental Health component had the following deficiencies identified at the time of the survey:

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

Based on record review and interview the facility failed to have records of the hospice physician's orders for crushed medication for 1 out 1 sampled residents (Resident #1).

Findings Included:

A review of Resident #1's health assessment dated . . . . . showed the resident had medical history and diagnoses: Hospice services, , high , , and , ... The resident requires total assistance with all activities of daily living. Special diet instructions, No added salt. Per health assessment the resident did not have any staged pressure sores. The resident needed assistance with self-administration of medications.

On . . . . . at 2:00 PM, observed Staff B put gloves on, crushed medication and placed the crushed medication in a yogurt cup.

On at 2:18 PM Staff A, stated "I will call the hospice service and have them fax the current crushed medication order."

On . . . . . at 2:25 PM Staff A handed a doctor order received via fax from Hospice service dated that documented the resident required full bed side rails, patient to have medications crushed and puree diet. Further review showed the resident received . . . . care 3 times a week.

Class III

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on record review, and interview, the facility failed to have an Administrator who passed the CORE competency test no later than 90 days after becoming employed as a facility's Administrator.

Findings included:

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Review of Staff A's employee file revealed the staff was hired on . . . . as the Administrator of the facility and the CORE training was completed on . . . . . .

On . . . . . at 12:42 Staff A stated "I did not passed the test by a point, I was going to take it again but I missed the date. I am going to try to hire a new administrator."

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 provide documentation that one out of three sampled staff received the required annual continuing education training in assisting residents with self-administration of medications (Staff A).

Findings Included:

A review of Staff A's employee file showed the staff was hired on . . . . . and the last training in assisting residents with self-administration of medication was received on . . . . . .

On at 2:01 PM Staff A stated "I know I have to renew the medication training, I was not prepared for the survey."

Class III

0151 - Physical Plant - Existing Facilities - 58A-5.023(2) FAC

Based on observation and interview the facility failed to provide a safe living environment, free of hazards, for four out of four residents (Residents #1-4).

Findings included:

On at 8:38 AM, observed outside on patio, different parts of walkers and a bed, empty containers of paint, and several piles of metal shelves.

On . . . . . at 8:40 AM Staff B stated "We already called someone to pick this stuff up. We did some repairs and this was all that was left of it."

Class III

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

Based on observation record review, and interview, the facility failed to have an updated health assessment done by healthcare provider after a significant change for one of one sampled residents (Resident #1).

Findings included:

A review of Resident #1's health assessment dated showed the resident had medical history and diagnoses: Hospice service, , high , and . The resident required total assistance with all activities of daily living. Special diet instructions, No added salt. Per health assessment the resident did not have any staged pressure sores. The resident needed assistance with self-administration of medications.

A review of Resident #1's Hospice interdisciplinary group plan of care update and review dated showed the resident had a new to the upper back. The resident also had a persistent to the left side of the neck despite treatment without signs, progressing and recurrent choking episodes.

On at 2:18 PM Staff A, stated "I will call the Hospice service and have them fax the current crushed medication order."

On at 2:25 PM Staff A handed a doctor order received via fax from Hospice service dated that documented the resident requires full bed side rails, patient to have medications crushed and puree diet. Further review of showed the resident received care 3 times a week.

Class III

0164 - Records - Inspection Availability - 58A-5.024(4) FAC

Based on record review and interview the facility failed to provide a current satisfactory health department inspection.

Findings included:

A review of the facility's bulletin board revealed the last health inspections was completed on

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On [redacted] at 10:09 AM Staff A stated "The health department already completed the inspection, and I am waiting for the results."

Class III

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

Based on record review and interview, the facility failed to ensure one out of three sampled staff completed the minimum of 3 hours of continuing education in limited mental health (Staff C).

Findings included:

A review of the facility license showed the limited mental health component.

A review of Staff C's employee file showed the staff was hired on [redacted] the last mental health continuing education was completed on [redacted].

On [redacted] at 1:40 PM Staff A, stated "I will make sure that Staff C completes the training."

Class III