STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966208	R 03/30/2018
NAME OF PROVIDER OR SUPPLIER **MAUD'S PLACE**	STREET ADDRESS, CITY, STATE, ZIP CODE **860 NW 186 DR** **MIAMI, FL 33169**	

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

0000 - Initial Comments

A Standard Biennial Survey Revisit was conducted on . . 27, 2018 and concluded on . . . 30, 2018. Maud's Place (License #10440) with Limited Nursing Services and Limited Mental Health components had deficiencies identified at the time of the survey:

0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC

Based on observation and interview the facility failed to keep medications secured at all times.

Findings included:

On . . . . at 9:35 AM observed that the medication cabinet in the kitchen was unlocked.

On . . . . at 9:38 AM Staff C stated, "I left it opened when I got the medication book for you."

Uncorrected Class III

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

Based on record review and interview the facility failed to notify the agency of a change of administrator within 10 days.

Findings included:

Review of the Health Finder database showed that Staff B was the administrator. Review of the facility's roster revealed that Staff A in the administrator.

On . . . . . at 11:33 AM Staff A stated that it was a mistake and that she is the administrator. And it was a mistake on the health finder and that they did not submit a change of Administrator. She stated that Staff B used to appear only as owner and Staff A as administrator and probably by mistake they left Staff B as both.

On . . . . . at 11:16 AM spoke to Staff A on the phone and she stated, "I am the administrator, we never sent the change of administrator because I am. I filled out the application yesterday but I will send it on Monday because today is Good Friday. I used to be Staff B's alternate administrator and I she was my alternate. I do not know what happened."

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Class III

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

Based on record review and interview the facility failed to provide evidence that the menu was reviewed annually by a licensed or registered dietitian, a licensed nutritionist, or a registered dietetic technician supervised by a licensed or registered dietitian.

Findings included:

Review of the menu posted in the dining that it was dated to but the #7 had been written over and changed into an 8 to look like 18.

On at 12:18 PM Staff A stated that the dietitian made a mistake with the date on the menu. She spoke to the dietitian on the phone on at 12:43 PM and stated that the dietitian would send her the menu when she gets to the office.

Uncorrected Class III

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

Based on record review and interview the facility failed to have a complete health assessments for 2 out of 7 sampled residents (#3 and #4).

Findings included:

Review of Resident #3 and #4's record revealed that the health assessments were not completed by a health care provider. The portions of the assessments that were missing in the previous survey were completed by Staff A.

Staff A stated on at 1:09 PM, "I completed them because the doctor will not do it."

Uncorrected Class III

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

Based on record review and interview the facility failed to provide evidence of three hours of continuing

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

education every 2 years of Limited Mental Health training for 5 of 7 sampled staff (Staff A, B, C, D, and E).

Findings included:

Record review showed Staff A, B, C, D, and E did not have the 3 hours of Limited Mental Health required every 2 years. The training provided by Staff A as Limited Mental Health stated Mental Health Certificate and awarded for participating in 4 hours for and 's .

On at 12:30 PM Staff A stated that they did the new training but she wrote 's because they have a lot of 's residents but that the training was really the limited mental health update.

Uncorrected Class III