STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968641	**03/22/2018**
NAME OF PROVIDER OR SUPPLIER **NEW AGE ADULTCARE INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1105 W 2ND AVENUE** **HIALEAH, FL 33010**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on . . . . . and concluded on . . . . . . New Age Adult Care Inc (license #12526) with Limited mental health component had the following deficiencies identified at time of the survey:

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

Based on record review and interview, the facility failed to ensure qualified staff submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable . . . . . for two out of eleven (G and J) sampled staff within 30 days.

Findings included:

Record review of the employee files found Staff G (hired . . . .) and Staff Staff J (hired . . . .) did not have proof documenting that the individual does not have any signs or symptoms of communicable . . . . . within 30 days.

Interview on . . . . at 4:45 PM the Administrator acknowledged she did not have the proof communicable their files.

Class III

0082 - Training - / - 58A-5.0191(3) FAC

Based on record review and interview, the facility failed to ensure one out of eleven (J) sampled staff had / training.

Findings included:

Record record revealed Staff J (hired)'s files did not have documentation of / training.

Interview on at 3:45 PM the Administrator acknowledged Staff J did not have the / training.

Class III

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SUMMARY STATEMENT OF DEFICIENCIES
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0125 - Fiscal - Surety Bonds - 429.27(2) FS; 58A-5.021(3) FAC

Based on record review and interview, the facility failed to have a surety bond for five of thirteen (7, 10, 11, 12 and 13) sampled residents.

Findings included:

Record review revealed that the facility did not have an update surety bond. The facility's surety bond posted expired on .

Interview on at 1:00 pm Staff A stated, "I am waiting on the new agreement."

Class III

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interview, the facility failed to provide a clean and descent living environment.

Findings included:

Observation on at 9:00 am revealed the following information:
's wall next to the air condition duct was dusty. Two urinals in # and no curtains on the windows for privacy. Hole in wall in # . The closet door were missing in # . Black chair in the second common area was not maintained. The 's ceiling was leaking in # .

Interview on at 2:00 pm Staff A stated, "I will take the urinal from # , I can put curtain just for security. I will fix the other findings."

Class III

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

Based on record review and interview the facility failed to provide a have completed personnel records for three out of eleven (E, F, & H) sampled staff.

Findings included:

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

Record review revealed Staff E (hired) and Staff F (hired) did not have employment references documented on the employment applications

Interview on at 3:50 PM the Administrator acknowledged the Staff E & F did not have references on the applications on file.

Record review found Staff H's updated background screening was not present at the time of the survey.

Interview on at 4:30 PM the Administrator stated, "I forgot to press the button which make it eligible."

Class III

0167 - Resident Contracts - 58A-5.025 FAC; 429.24 FS

Based on record review and interview the facility failed to have complete contract with the monthly rate documented for one of thirteen sampled Residents (#3).

Findings included:

Record review revealed Resident #3's contracted did not have the monthly rate and signed on .

Interview on at 1:00 pm Staff A stated, "I am waiting on the Legal Guardian, they have an Attorney that read and states the amount they will pay."

Class III

L241 - LMH - Records - 429.075(3-4); 58A-5.029(2) FAC

Based on record review and interview the facility failed to have a signed an annual Community Living Support Plan and , agreement for one of thirteen sampled residents (Resident #3).

Findings included:

Record review revealed Resident #3 was diagnosed with , and received , , ( ). Resident #3's record revealed the facility did not have a community living support plan and , agreement on file.

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Interview on [redacted] at 3:00 pm Staff A acknowledged that this documents needed to be signed as soon as possible.

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 the staff who are in direct contact with mental health residents received the 6 hours minimum training for two out of eleven (F and G) sampled staff.

Finding included:

Record review revealed Staff F (hired [redacted]) and Staff G (hired [redacted]) did not have proof of completing the minimum 6 hours limited mental health (LMH) training. Staff G file contained documentation of the 3 hours update dated [redacted].

Interview on [redacted] at 4:50 PM the Administrator acknowledged they did not have the training for LMH.

Class III