STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967751	**05/23/2018**
NAME OF PROVIDER OR SUPPLIER **WATERWAY HOMES ALF INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **5895 SW 35 STREET** **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 . . . . Waterway Homes ALF, Inc. (license #11862) had the following deficiencies identified at the time of survey:

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

Based on record review and interview the facility failed to provide documentation that the Administrator received / training.

Findings included:

A review of the Administrator's employee file revealed, the hiring date was . . . . . , there was no documentation of the / training was received.

On at 10:50 AM the Administrator stated "I will get with my consultant to make sure all the training are completed."

Class III

0083 - Training - First Aid and - 58A-5.0191(4) FAC

Based on record review and interview the facility failed to provide documentation of a current First Aid and training for the Administrator.

Findings included:

A review of the Administrator's employee file showed there was no documentation of the First Aid and training.

On at 10:50 AM the Administrator stated "I will get with my consultant to make sure all the training are completed."

Class III

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

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

Based on record review and interview the facility failed to provide documentation that the Administrator received the required annual 2 hours of continuing education training in assisting residents with self-administration of medications.

Findings included:

A review of the Administrator's file showed the last training on Assisting with self-administered medication was received on [redacted].

On [redacted] at 10:50 AM the Administrator stated "I will get with my consultant to make sure all the training are completed."

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(6) FAC

Based on record review and interview the facility failed to provide documentation that Administrator had the food service training on an annual basis.

Findings Included:

A review of the Administrator's employee file showed there was no documentation of the food service training.

On [redacted] at 10:50 AM the Administrator stated "I will get with my consultant to make sure all the training are completed."

Class III

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

Based on observation and interview the facility failed to have a menu reviewed annually by a licensed dietician.

Findings included:

A review of the facility's bulletin board did not have a posted up to date menu reviewed by a licensed dietician.

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SUMMARY STATEMENT OF DEFICIENCIES
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On [redacted] at 9:26 AM the Administrator stated he did not have a menu because he did not have any residents in the facility.

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
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SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

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

Based on record review and interview, the facility failed to maintain the employment status of all employees within the clearinghouse.

Findings included:

A review of the background screening database showed there was no staff listed on the facility roster .

On at 1:40 PM the Administrator acknowledged the deficiency and stated that he was not aware a roster was required.

Unclassified