

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967860	(X3) DATE SURVEY COMPLETED 05/15/2018
NAME OF PROVIDER OR SUPPLIER MIAMI COMFORT COVE, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 3511 N W 11 COURT MIAMI, FL 33127	

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

0000 - Initial Comments

An Abbreviated Biennial Survey was conducted on , 11, 2018 and concluded on , 2018.
Miami Comfort Cove, Inc (License #1869) had the following deficiencies identified at time of the survey:

0026 - Resident Care - Social & Leisure Activities - 58A-5.0182(2) FAC

Based on observation, record review, and interview the facility failed to conduct scheduled activities and offer/ encourage the residents to participate in social, recreational, educational and other activities within the facility and the community.

Findings included:

Observations on at 9:00 AM during the tour found the activities calendar posted on the wall of the common area. The calendar for , 2018 showed at 9 AM- 11 AM, Stretching. Residents were observed through out the day sitting in their and in the common area watching television.

Interview on at 9:15 AM with Residents #10 and at 11:49 AM with Resident #11 revealed they didn't have activities.

Interview on at 2:50 PM the Administer acknowledged that the activities calendar was not followed.

Class III

0054 - Medication - Records - 58A-5.0185(5) FAC

Based on observations, record review, and interview the facility failed to ensure the medication observation records were not maintained for seven out of twelve (#1, 2, 3, 6, 7,10, and 11) sampled residents.

Findings included:

Review of the medication observation records revealed they were not initialed as given for Resident #2, 2, 3, 6, 7, 10, and 11's on for 8 AM medications.

Medication reconciliation conducted on during med pass observation at 12 PM found the

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packs did not have medications in them for for the morning medications.

Interview with on at PM the Administrator stated, "I review it with Staff B."

Class III

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

Based on observations, record review, and interview the facility failed to have a written work schedule that reflects its 24- hour staffing pattern with 212 hours per week.

Findings included:

Observation on from 9:00 AM found two staff members (Staff B and C) in facility alone with a census of 12 residents. The staff schedule revealed Staff B worked 7 AM to 6 PM, Staff C worked 7 AM to 7 AM, and Staff D worked 7 AM to 7 PM.

The facility was required to have weekly staffing hours of 212 hours for a census of 12 residents, the schedule only had 108 weekly staffing hours.

Interview on at 9:10 AM with Staff C stated, "The Administrator is coming with everything. You can talk to her."

Class III

0083 - Training - First Aid and - 58A-5.019(4) FAC

Based on record review and interview the facility failed to ensure one out of five (A) sampled staff completed in First Aid and training in the facility at all times.

Findings included:

Review of employee files for Staff A (.) revealed the facility did not have any documentation proving she received update for First Aid and training. Staff A's training expired on The staff schedule showed Staff A worked alone from 7:30 PM to 7:00 AM.

Interview on at 1:30 pm with the Administrator, confirmed that Staff A, has not completed the update First Aid and training, and that she will ensure that the staff member will receive the proper

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training as soon as possible. Class III 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 in place for six out of twelve (#2, 4, 5, 6, 7, and 8) sampled residents, who the facility was the payee for. Findings included: Record review showed Residents #2, 4, 5, 6, 7, and 8 had their monthly social security checks directly deposited to the facility's bank account monthly. Record review found the facility did not have a surety bond with twice the value of the resident's monthly aggregate income. Interview on _____ at 3:00 PM the Administrator stated, "I am the payee for these resident. I can call my insurance and get the surety bond." Class III 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on record review and interview the facility failed to have the emergency management plan reviewed annually. Findings included: Record review revealed that the facility did not have a current emergency management plan submitted and/or approved annually. The last letter of approval was dated _____ and expired on _____. Interview on _____ at 1:30 PM the Administrator stated that the facility did not have the 2018 approved CEMP plan, but that she will get it done as soon as possible. Class III		