| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | AL11969016 | 05/31/2018 |
| NAME OF PROVIDER OR SUPPLIER<br>**LAS DELICIAS ALF 2** | STREET ADDRESS, CITY, STATE, ZIP CODE<br>**3840 NW 184TH ST**<br>**MIAMI GARDENS, FL 33055** | |

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

**0000 - Initial Comments**

A Standard Biennial survey was conducted through 21 to , 2018. Las Delicias ALF #2 (License #12882) had the following deficiencies identified at the time of the survey:

**0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC**

Based on observation, record review and interview, the facility failed to provide care and supervision appropriate to the needs of one of seven residents in order to prevent the resident from falling (#3). Resident #3 obtained two hematomas in her facial area .

Findings included:

On at 9:25 am, observed Resident #3 sitting on a wheelchair wearing a belt around her waist, and she was not able to remove it.

On at 9:30 pm, observed Resident #3 sleeping in the employee four chairs and a TV stand blocking her bed.

Record review revealed that Resident #3's (admitted on ) health assessment (dated ) had diagnosis of , History of , risk for , potential for functional decline, , Mayor , hearing loss, , History of Colonic , sensorineural hear loss and History of frequent ."

Record review revealed that Resident #3's health assessment stated that she needed supervision with ambulation, bathing, dressing and toileting. The resident was independent for eating, and transferring, and she needed administration of medication."

On at 12:00 pm, Staff A, C and D stated Resident #3 and was in the hospital, but they did not have the date or other information.

Record review revealed that Resident #3's file did not have written information regarding or hospitalization.

On at 9:47 pm Staff A stated, "All that information is at her Program. I thought that I did not need to have it due to the Program has it, I will get the information from them, and I will send it to you."

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A review of Resident #3's hospital documents revealed, "A lady admitted on and discharged on in the hospital had a Hematoma measuring up to 6 mm in thickness. Trace right anterior Parafacine Hematoma measuring 2 mm."

Class III

**0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28(1-2) FS**

Based on observation, record review and interview the facility failed to treat two of seven sampled residents with dignity and respect (#2 and #3). The residents' movements were restricted by which they could not remove on their own.

Findings included:

Observation on at 9:00 am revealed Resident #2 in #. lying in bed with a half bed rail up and with a shower chair blocking the bed.

Interview at 9:00 am with Staff D stated, "Resident #2 cannot come out from bed without assistance."

On at 9:19 am Resident #2 stated, regarding getting out of bed alone, "I would like to go out, but I can't."

On at 9:25 am, observed that Resident #3 was sitting on a wheelchair wearing a bell around her waist, and she was not able to remove it.

On at 9:25 am, Staff C and D stated, "The daughter bring it and request that she use it."

Record review revealed that Resident #3 was , and she admitted in the facility on . Resident #3 had a diagnosis (1823 dated ) of , History of , risk for , potential for functional decline, , Mayor , hearing loss, , History of Colonic , sensorineural hear loss, History of frequent . Resident's health assessment states that she needs supervision on ambulation, bathing, dressing and toileting.

Observation on at 9:30 pm revealed that Resident #3 was sleeping in the employee four chairs and a TV stand blocking her bed.

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SUMMARY STATEMENT OF DEFICIENCIES
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On at 9:30 pm with Staff D stated, "It is to prevent that she comes out from the bed and . She has no balance and she goes to the asks assistance. We have a camera the daughter brought, and we use it, too."

On at 2:11 pm, by phone, Resident #3's daughter stated, "I am aware that my mother uses a belt around her waist; however, it is not restriction, she never complaint to wear it. It is just to prevent she , if she does not have it on her she could by bending, she has problem with stability, and she has several times in everywhere. This is why I prefer that she wear the belt, which is not a restriction. She will not be safe in a big facility, where they are all the time short of staff; at least here, they have two staff at all time for six Residents. I bought a camera, and they also use it to see her."

On at 11:00 am Staff A (by phone) stated, " I do not know why Staff C and D had a shower chair and a fan blocking Resident #2 because she does not come out from bed." Staff A stated, "Resident #3's daughter asked to use the belt to prevent her mother , and we use the chairs because Resident #3 likes to come out from bed, and we do not want that she ."

Class III

**0053 - Medication - Administration - 58A-5.0185(4) FAC**

Based on observation and interview the facility failed to follow the correct procedure when assisting one of seven sampled residents with self-administration of medications (#2) .

Findings included:

Observation on at 10:00 am revealed that Staff C took all the medication that were pre-poured in a cup and placed them into a medication crusher. Then, Staff C took a cup of jelly and a spoon and put the jelly with the mix of medication directly in Resident #2's mouth.

Review of the Medication Observation Record (MOR) showed, to be given at 8:00 am:

81 mg
20 mg
75 mg
50 mg
0.5 mg
50 mg

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SUMMARY STATEMENT OF DEFICIENCIES
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50 mcg

Observation on at 10:00 am revealed that Staff C did not use the MOR to explain the medication, and Staff C did not sign the MOR.

Class III

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

Based on observation and interview, the facility failed to keep all medications locked for two of seven sampled residents (Residents #5 and 6) .

Findings included:

Observation on at 8:50 am showed medications for Residents 5 and 6 inside the refrigerator, unlocked.

On at 8:50 am, Staff D acknowledged that the medications were unlocked and belonged to Residents 5 and 6. Staff D stated, "We are going to get a box with a lock to keep them inside of the refrigerator."

Class III

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

Based on interview and record review, the facility failed to have a doctor order for all medications for one of seven sampled residents (Resident #2).

Findings included:

Observation on at 9:33 am revealed Staff C crushing Resident #2's medications. Then, Staff C poured the crushed medications in a jelly. Next, Staff C gave the mixture to Resident #2 with a spoon.

Record review revealed that the Medication Observation Record (MOR) showed that to be taken at 8:00 am were:

81 mg
20 mg

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75 mg
50 mg
0.5 mg
50 mg
50 mcg

A review of Resident #2's record revealed no doctor's order to crush her daily medications.

On at 9:47 pm by phone Staff A stated, "We crush Resident #2 medications because her daughter asks for it. We do not have a doctor order, but I will request one."

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 safe living environment.

Findings included:

Observation on at 8:55 am in # revealed that the location of the bed for Resident #1 was up against the wall and the closet door.

On at 8:55 am Staff D explained that the ceiling leaked, and they moved the bed.

Observed on at 8:57 am a small leak at the kitchen and living area.

On at 8:57 am Staff D stated, "The leaking just started today; it has been raining the whole week. We advised the Administrator, and someone is coming to fix it."

Class III

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

Based on observation, record review, and interview, the facility failed to have an updated health assessment for one of seven (#1) sampled residents' change in health condition after hospitalization.

Findings included:

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SUMMARY STATEMENT OF DEFICIENCIES
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On at 9:00 am, observed Resident #1 was sitting at the dining breakfast and wearing sleeping socks.

On at 9:25 am, observed Staff C lifting Resident #1 to transfer her to a chair and put her feet up.

On at 9:00 am Staff C and D stated that Resident #1 had a on her heels.

On at 9:25 am Staff C stated, "She went to the hospital and come back with care. There is a nurse that comes daily to take care of her."

Record review revealed that Resident #3's health assessment (dated ) had a diagnosis of , History of Accident, Left and .

Record review revealed that Resident #1's file did not have written information regarding the resident's care after she came back from a hospitalization. Resident #1's health assessment reflected, "No ."

Record review revealed no home health care information for Resident #1.

Observation on at 12:00 pm revealed a Home Health Nurse providing care to Resident #1's heels.

Record review revealed that the home health certification was from - at Resident #1's Right heel (set on ) and left heel (set on ). There was no documentation of a new health assessment for resident after hospitalization and care.

Class III

**0181 - Emergency Plan Approval - 58A-5.026(2) FAC**

Based on record review and interview the facility failed to have the current emergency management plan approval.

Findings included:

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Observation on at 11:00 am revealed a copy of an electronic check for $93.75 dated on , and an emergency management plan (approval letter/2017) posted on board dated on .

Record review revealed that the facility did not have a copy of the emergency management plan approval in the facility at.

On at 12:00 pm Staff A confirmed that the Emergency Management Plan approval posted was not updated. Staff A stated, "This application was already done and submitted, but I did not receive the approval letter, yet."

Class III