STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965494	R 06/18/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CORAL PARK SENIOR CARE OF MIAMI	**9640 SW 10 TERRACE MIAMI, FL 33174**

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

0000 - Initial Comments

A Standard Biennial Revisit Survey was conducted on 06/14/2018 & 06/18/2018. Coral Park Senior Care of Miami with Limited Mental Health service component (license # 9875) had deficiencies identified at the time of the survey:

0007 - Admissions - Criteria - 429.26(11) FS; 58A-5.0181(1) FAC

Based on observation, record review, and interview, the facility failed to ensure that policies and procedures regarding appropriate admission were put in place and that staff was adequately trained on procedures after one of six sampled residents failed to meet admission criteria, (Resident #2). care was performed by unqualified persons, including the administrator and/or her designee. The facility failed to put the needed services by qualified professionals in place following the inappropriate admission.

Findings included:

On , , 2018 at 9:05 am during the tour of the facility, observed Resident #2 bed bound with full bed rails in a shared . According to Staff C, Resident #2 was on hospice.

A review of the admission/discharge log showed that Resident #2 was admitted on .

A review of Resident #2's record showed signed documentation assigning the Administrator of the facility as the resident's Power of Attorney (POA). Hospice record review for Resident #2 showed an election to revoke hospice services dated and signed by POA on .

Health assessment for Resident #2 dated , 2017, documented that the resident was diagnosed with , , , , , , and , . The physician indicated the resident needed supervision with ambulation and assistance with the rest of the activities of daily living.

A review of hospice service records showed Resident #2's physical/ status on 09, 2017 to be:

"Functional status: Fatigued, activity intolerance, prior functional status: Bed/wheelchair bound, mobility: bed bound, muscle strength: Continued . risk assessment: MAHC 10. A score of four or more considered risk for falling.

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at not healing at sacral area, measurements in centimeters, length 3, width 3 in, 1 / tissue observed beefy red, percentage at 50. Dressing changed as per orders in Care Plan."

Another health assessment for Resident #2 dated , 2017, showed the resident was diagnosed with , , , , , , and . The physician indicated the resident needed total care with the activities of daily living except for assistance with dressing.

Further review of Resident #2's record showed that there was no documentation of care being provided for the sacral .

Hospice record review for Resident #2 showed a prescription for hospice dated and signed by doctor on . A review of hospice service records showed a re-admission of Resident #2 dated 18, 2017.

A review of hospice service records showed Resident #2's physical/ status on 18, 2017 to be:

Functional status: Other-Generalized , mobility: Bed bound. Muscle strength: Continued , risk assessment: MAHC 10. A score of four or more considered risk for falling.

present on admission, located at sacral-left area, stage unstageable, measurements in centimeters: length 2, width 4 and depth 0.

Additional review of Resident #2's record showed that there was still no documentation of care by a qualified health professional between 9 when it was and , when it was unstageable.

On , 2018 at 9:20 am, the Administrator stated that Resident #2 was able to walk with help on the day of admission but that in few days her health deteriorated and that is when she requested hospice services.

On , 2018 at 9:58 am, during a phone interview, Nurse Practitioner stated, "The resident was in hospice and they transferred from one Assisted Living Facility (ALF) to the other ALF. The owner told me that she had to close the ALF. I am not sure if I saw the , but I do not remember the

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SUMMARY STATEMENT OF DEFICIENCIES
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Resident walking, it is strange that if the Resident was not walking that needed supervision for ambulation. I do not work anymore for the doctor but they should have the copy of the assessment on file."

On , 2018 at 10:30 am, during a phone interview, the Registered Nurse (RN) for hospice stated, "The family member revoked hospice services, so what we did is what we call verbally teaching the family how to take care of the and the administration of medicines. We did this on the last day, 9."

On , 2018 at 2:24 pm, on a phone interview, the Administrator stated, "When the resident came to the facility was healthy. The Resident had no wounds, the resident was completely clean. I am not sure if it was the change of facility or due to a knee surgery that the Resident had many years ago but the resident always had pain on the knee. The health started to decline and always asked me to take care of her. No, I did not know that the Resident was bed bound; even if the Resident is bed bound we still always get the Residents up."

A review of records during a reinspection on showed that the facility had no documentation of staff training in admission policies or procedures.

Uncorrected
Class III