STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967429	**07/12/2018**
NAME OF PROVIDER OR SUPPLIER **SWEET HOPE ASSISTED LIVING CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **13551 S W 208 STREET** **MIAMI, FL 33177**	

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

0000 - Initial Comments

An Abbreviated Biennial Survey was conducted on . Sweet Hope Assisted Living Corp (License #11476) had the following deficiencies identified at the time of the survey:

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 have a current physician's order for the use of half (1/2) bed rails for one out of five sampled residents (Resident #4).

Findings included:

On at 8:55 AM during the facility tour revealed Resident #4 had 1/2 bed rails attached to her bed.

A review of Resident #2's file showed the physician's order for the use of half bed rail was dated .

On at 12:10 PM Resident #4 revealed "No, I am not able to move the rail from my bed. I do not have the strength to do so."

On at 12:13 PM Staff B stated, "Resident #4 uses the bed rails, but we have not renewed the order. I will contact her doctor and get the order renewed."

Class III

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

Based on record review and interview, the facility failed to have documentation of freedom from communicable and failed to have a negative annual examination verification for two out three sampled staff (Staff B and C).

Findings included:

A review of Staff B's employee file showed the last negative examination was dated on .

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

Staff C stated on at 10:40 AM, "I have been working here for about a year."

A review of Staff C's personnel file revealed that there was no documentation of a freedom from communicable statement.

On at 11:38 PM Staff B stated, "I have not done the annual examination, I will get that completed and we will get one completed for Staff C also."

Class III

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

Based on observation, record review, and interview, the facility failed to maintain a written work schedule that reflects its 24-hour staffing pattern for a given time period

Findings included:

Observation on at 8:55 AM revealed Staff B and C were providing care to 5 residents.

Review of facility's records showed there was no staffing patten available for review.

On at 9:11 AM Staff B stated "I do not have a schedule posted, I have to make the schedule."

Class III

0081 - Training - Staff In-Service - 58A-5.0191(2-3) FAC

Based on record review and interview, the facility failed to have documentation that staff had received in-service training in the areas of Activities of Daily Living and Behavioral Needs, Incident Reporting, Resident Rights, and Recognizing, Reporting Neglect, & , for one out of three sampled (Staff C).

Findings included:

A review of Staff C's file showed there was no documentation that the staff received the required training in the areas of Activities of Daily Living and Behavioral Needs, Incident Reporting, Resident Rights, and Recognizing, Reporting Neglect, & , training.

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SUMMARY STATEMENT OF DEFICIENCIES
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Staff C stated on at 10:40 AM, "I have been working here for about a year."

On at 10:11 AM Staff B stated, "Staff C began working here about a year ago, she has her employment application and her training documents but the Administrator must have misplaced them."

Class III

0090 - Training - - 58A-5.0191(11) FAC

Based on record review and interview the facility failed to ensure that one out of three sampled staff was knowledgeable in the subject of ( ) (Staff C).

Findings included:

On at 10:40 AM Staff C stated, "I have been working here for about a year." The ( ) was the form that was given to the emergency department in case of an emergency that listed the resident's medications.

A review of Staff C's employee filed showed the staff received the ( ) on .

Class III

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

Based on record review and interview, the facility failed to maintain an application in the employee records for one out of three sampled staff (Staff C).

Findings included:

Staff C stated on at 10:40 AM, "I have been working here for about a year."

A review of Staff C's employee file showed there was no employment application in the file.

On at 10:11 AM Staff B stated "Staff C began working here about a year ago, she has her employment application and her trainings documents but the administrator must have misplaced them."

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Class III

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

Based on record review and interview, the facility failed to register all employees in the background screening's clearinghouse employee roster for two out of three sampled staff (Staff A and C).

Findings Included:

A review of the background screening's clearinghouse database showed Staff A and C were not listed on the roster.

Staff C stated on . . . . . at 10:40 AM, "I have been working here for about a year."

On . . . . . at 11:30 AM Staff B stated "The Administrator takes care of that, I will let her know to fix it because she is not aware that the information on the website is not accurate."

Unclassified