STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911830	**07/18/2018**
NAME OF PROVIDER OR SUPPLIER **ALF MANAGEMENT AND PROFESSIONAL SERVICES,**	STREET ADDRESS, CITY, STATE, ZIP CODE **21 SW 75 AVENUE** **MIAMI, FL 33144**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on , 2018. ALF Management & Professional Services, Inc (license #5902) had the following deficiencies identified at the time of the survey:

0031 - Resident Care - Third Party Services - 58A-5.0182(7) FAC

Based on record review and interview the facility failed to provide documentation of the hospice plan of care plan for one out of two sampled residents (Resident #1) .

Findings included:

Review of Resident #1's record revealed that the admission date was on . There was no evidence that Resident #1 had an Initial Care Plan provided by hospice agency. The resident began hospice services on .

On a 3:30 PM the Administrator stated, "That's all of the paperwork the hospice left for Resident #1."

Class III

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

Based on record review and interview the facility failed to ensure qualified staff have proof of a negative examination documented on an annual basis for one out of six (A) sampled staff.

Findings included:

Personnel record review found that Staff A's (hired) documentation of negative testing was dated and expired on .

On at 3:30 PM with the Administrator acknowledged that the documentation was not updated.

Class III

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

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SUMMARY STATEMENT OF DEFICIENCIES
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Based on record review and interviews, the facility failed to provide documentation ensuring that two out of six staff who provide direct care to residents received the required in-service training within 30 days of employment (B & C) .

Findings included:

A review of Staff B's (hired) and Staff C's (hired)records showed no documentation that they completed trainings on resident behavior and needs and providing assistance with the activities of daily living.

On at 3:20 PM the Administrator acknowledged that the staff had not been trained in these areas.

Class III

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

Based on observation, record review, and interview facility failed to have a menu updated posted where residents at the could see it.

Findings included:

Observations on at 9:20 AM found no menu posted where residents could see it. A menu was found in the kitchen.

On at 3:30 PM the Administrator acknowledged the menu was not posted in the common area.

Class III

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

Based on record review and interview the facility failed to have the approved emergency management plan reviewed annually.

Findings included:

Record review found that the facility did not have a current emergency management plan approved

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SUMMARY STATEMENT OF DEFICIENCIES
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annually. The last letter of approval was dated in 2017.

On at 10:07 AM the Administrator stated, "I am still waiting for him to send me the letter."

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on record review and interview failed did not have monoxide detector and has not notified each resident/resident representative in writing of implementation of the plan.

Findings included:

The facility did not documentation that the residents were notified of the implementation of the power plan and did not have any monxide detectors in the facility.

On at 2:07 PM the Adminstrator acknowledge he had not notified resident about the power plan and stated, "I did not know I had to have a monoxide detector."

Class III

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SUMMARY STATEMENT OF DEFICIENCIES
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Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on record review, and interview the facility failed to have one out of six sampled staff listed on the Background employee roster

Findings included:

A review of the facility's roster in the Background Screening Database showed that Staff (hired) listed. Staff E was not listed.

On at 3:30 PM, the Administrator acknowledge Staff E was not listed on the employee roster.

Unclassified