STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910951	**08/01/2018**
NAME OF PROVIDER OR SUPPLIER **DIVINE LIVING IN HIALEAH LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **70 EAST 21ST STREET** **HIALEAH, FL 33010**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on , 2018 and , 2018. Divine Living In Hialeah LLC (license #7170), with a limited mental health component, had the following deficiencies identified at the time of the survey:

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(6) FAC

Based on record review and interview the facility failed to provide the initial 4 hours of education training on providing assistance with self-administered medications and safe medication practices in an assisted living facility for one of 12 sampled staff (K).

Findings included:

Observation on at 2:00 pm revealed that Staff A searching through Staff K's record; however, Staff A could not find the 4 initial hours.

Record review revealed Staff K have documentation of a minimum of 2 hours of continue education training (dated) on providing assistance with self-administration of medications; however, she was missing the initial 4 hours training in file.

Interview on at 2:00 pm Staff A acknowledged that Staff K was missing her training with self-administration of medication.

Class III

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interview the facility failed to ensure that the facility was maintained, in good repair.

Findings included:

Observations made on at 9:00 AM showed the upstairs ceiling had brown stains on the panels, and peeling paint on the and wall on the second floor. (photos taken).

On at 10 :00 AM the Administrator stated, "It is the air conditioner. We have the guy coming to

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fix it."

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on record review and interview the facility failed to provide documentation of an updated liability insurance policy. The facility, which acted as payee for several residents, also failed to provide documentation of a current surety bond.

Findings included:

Review of the liability insurance policy found it was dated and expired on . Review of the facility's surety bond policy was found dated and expired on .

On at 11:30 AM the Administrator confirmed they were the payee for several of the residents and that the surety bond was expired and that the liability insurance policy was expired.

Class III

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

Based on record review and interview the facility failed to have an eligible Level II background screening for one out of 12 (Staff K) sampled staff.

Findings included:

Record review revealed a Background Screening result dated for Staff K (hired) that stated, "Awaiting Privacy Policy." A review of the Background Screening Clearinghouse database reflected results for Staff K which stated, "Eligible dated ."

Interviewed on at noon, Staff A acknowledged that Staff K's Background Screening needed to have an eligible print out.

Class III

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