

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965505	(X3) DATE SURVEY COMPLETED 09/04/2018
NAME OF PROVIDER OR SUPPLIER SUN COAST RESIDENTIAL CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 813 SW 9TH STREET HALLANDALE BEACH, FL 33009	

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

0000 - Initial Comments

An unannounced licensure complaint survey, CCR #2018011787, was conducted on _____ at Sun Coast Residential Care, License #9856. There was a deficiency identified at the time of the visit.

The above complaint survey was conducted in conjunction with the Relicensure Survey. Please see separate report for findings.

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

Based on observation, and interview, the Assisted Living Facility's (ALF) Owner/Administrator failed to ensure the safety and supervision of it's residents, for 3 out of 3 sampled residents (Resident #1-#3). As evidenced of the Owner/Administrator departed the ALF, leaving the residents with a visitor to be supervised (including providing care and services) instead of with a trained facility staff member.

The findings included:

The Surveyor arrived at the facility at 9:45 AM on _____ and was greeted by someone the name of "Confidential" at the facility's front gate. The gate was locked, and "Confidential" asked who was the Surveyor and that the Administrator was not here at the facility and that she would call him. The Surveyor showed the state ID badge in which "Confidential" then went inside the facility to go get the phone and gate code leaving the Surveyor standing outside of the gate unable to get into the facility.

Upon entrance to the facility at 9:55 AM on _____, it was asked to "Confidential" what is her last name and her title at the facility. "Confidential" stated that she does not work at the facility and that she is just a visitor that comes every few weeks. When asked is there any staff here working, it was stated "yes The Administrator." The Surveyor stated that the Administrator is not here, is anyone else here that is working? it was stated no, and that the Administrator will be here soon.

While waiting for the Administrator to arrive at 9:57 AM "Confidential" was observed sweeping the floor in the kitchen and providing assistance to Resident #2 who was calling "Confidential" by name from the _____. When "Confidential" came back from providing the assistance it was asked a second time to "Confidential" that she did state that she was a visitor? "Confidential" confirmed by stating "yes." It was further asked "do the Administrator leave you here often alone with no one here?" It was stated no, and that I'm not here often, I stop by to visit a resident here once every few weeks. When asked, do you always clean and help the residents when you are here to visit? It was stated "sometimes."

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 10/05/2018
FORM APPROVED

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At 10:08 AM on 09/04/2018, the Administrator arrived at the facility. During an interview with the Administrator at 10:18 AM on 09/04/2018 when asked why did you leave your residents alone with a visitor and there's no staff here? The Administrator, stated that he had to go pick up tires for his truck. Observations while touring the facility on 09/04/2018 revealed that Resident's #2 and #3 share a room. Both Residents are 85 and need assistance with all Activities of Daily Living (ADL's). During an interview with both Residents #2 and #3 confirmed that they both require assistance due to visual impairment and both residents rely on staff to provide the assistance. At the time of the Surveyor's arrival no facility staff was present to provide care or supervision to any of the residents at the facility. There were also no staff hired by the facility present in the event of an emergency if one of the residents required emergency assistance. The administrator acknowledged the findings, no additional information was provided for review. Class III		