STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968296	R **10/11/2018**
NAME OF PROVIDER OR SUPPLIER **TIKAS ALF INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **14822 GARDEN DR** **MIAMI, FL 33168**	

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

0000 - Initial Comments

A Follow Up Visit to a Complaint Investigation (CCR 2018008869) Survey was conducted on , 2018. Tikas ALF Inc. (License #12200) with Limited Mental Health component had deficiencies at time of the visit.

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

Based on record review and interview, the facility failed to ensure that a home health agency left documentation in the facility regarding administration to three out of six sampled residents (Resident #2, #6, and #7).

Findings included:

A review of Resident #7 prescriptions showed an order for Flex touch solution pen-injector 100 unit/ml dated .

A review of the Medication Record Observations (MORs) on revealed Residents #2, #6, and #7 were receiving administration. A review of the home health record showed no records for administration for the month of (2018).

During an interview on at 8:34 AM, the home health nurse stated, "I have it with me, Resident #2 receives at night only."

On at 8:36 AM the Administrator stated "Resident #7 is going to the doctor. We just give him his medication. He does not have an order yet. Yes, he has been taking his ."

On at 8:41 AM observed the home health nurse writing records for administration for the month of .

Uncorrected Class III

0054 - Medication - Records - 58A-5.0185(5) FAC

Based on record review and interview, the facility failed to maintain an accurate daily medication observation record (MOR) for one out of six sampled residents who received assistance with self-administration of medications (Resident #4).

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Findings included:

A review of the MOR on revealed that Resident #4's MOR sheet was not initialed for 80-4.5 MCG INH on at 8:00 PM. The facility did not have any documentation on the MOR explaining why the medication was not given to the resident.

During an interview on at 9:54 AM, the Administrator stated "Resident #4 received his last night" and proceeded to sign the MOR.

Uncorrected Class III

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

Based on observation and interview, the facility failed to provide a safe living environment free of hazards to six out of six sampled residents (Residents #1, #2, #3, #4, #5, and #6) and also failed to ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order.

Findings included:

During the facility tour on roaches were observed on the dining and the backyard had debris, trash, wood, and broken wheelchair.

During an interview on at 7:44 AM the Administrator stated "we are still working on fixing the backyard. The Administrator added "the guy came yesterday to spray the facility."

Uncorrected Class III

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

Based on observation, record review, and interview, the facility failed to maintain an up-to-date admission and discharge log listing the names of all residents.

Findings included:

During the facility tour on at 7:31 AM, Resident #7 was observed on his bed.

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

A review of the facility record on . . . . revealed the facility failed to list Resident #7 on the admission and discharge log.

During an interview on . . . at 7:40 AM, the Administrator stated "Resident #7 is not in the book yet. He came on the 5th of . I did not have any chance to put him in the book."

Uncorrected Class III

0162 - Records - Resident - 58A-5.024(3) FAC

Based on observation, record review, and interview, the facility failed to maintain a completed and accurate record for two out of six sample residents (Resident #3, #4, and #7). The facility did not have a Power of Attorney (POA) on file for Resident #4.

Findings included:

On . . . . at 8:59 AM, observed the Administrator assisting Resident #4 and #7 with self-administration of medications.

A review of the facility record on revealed that the facility did not have a signed informed consent to assistance with medication by unlicensed for Resident #3 and #7. Resident #4 informed consent was signed but not dated. Also, Resident #4's contract was signed by a family member, but the facility did not have a POA in file for Resident #4.

During an interview on . . . . at 9:09 AM, the Administrator stated "Resident #4 should have a POA in the file. A family member signed the contract." The Administrator went through the file, did not find the POA. Then, the Administrator contacted Resident #4 guardian over the phone and requested the POA. At 9:24 AM the Administrator added "anything that has not been signed for Resident #3 I am waiting on the guardianship to sign them."

Uncorrected Class III

0167 - Resident Contracts - 58A-5.025 FAC; 429.24 FS

Based on observation, record review, and interview, the facility failed to have an executed contract for the resident or the resident's legal representative before or at the time of admission for one out of six sampled residents (Resident#4).

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SUMMARY STATEMENT OF DEFICIENCIES
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Finding included:

During the facility tour on at 7:31 AM, Resident #7 was observed on his bed.

A review of the facility record on revealed that the facility did not have a signed and dated contract in file for Resident #7.

During an interview on at 7:40 AM, the Administrator stated "He came on the 5th of ."

During an interview on at 9:58 AM, Resident #7 stated "I have been here for about a week."

Uncorrected Class III