

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11911829	(X3) DATE SURVEY COMPLETED R 10/09/2018
NAME OF PROVIDER OR SUPPLIER CENTRAL PALACE RESIDENTIAL,	STREET ADDRESS, CITY, STATE, ZIP CODE 4491 SW 8 STREET MIAMI, FL 33134	

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

0000 - Initial Comments

A Standard Biennial Survey Revisit was conducted on 09, 2018. Central Palace Residential (license #7107) with Limited Nursing Services and Limited Mental Health components had deficiencies identified at the time of the survey:

0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC

Based on record review and interview, the facility failed to obtain an updated assessment for risk of elopement for two of five residents who showed signs of elopement risk (Residents 2, # 3, # 4, # 5 and # 6).

Findings included:

Record review revealed that Resident # 2 was re-evaluated by her physician on 11/11/2014 and he did not consider the resident at risk for elopement, but the administrator put her on the At-Risk Resident ID Check log. There were 5 residents in the log, Resident # 2, # 3, # 4, # 5 and # 6. Further review revealed the elopement assessment tool the facility was using was the Evacuation and Assessment tool.

[illegible]

Review of the hospital records showed Resident # 2 had been placed under [REDACTED] by the police on [REDACTED] at a fast food restaurant due to bizarre behavior. The record stated that the resident's clothes were covered in her own fecal matter. The resident had [REDACTED] on her feet. She'd stated that she could not remember where she lived. She'd stated that she had not taken her medicine for a while. Resident #2 was hospitalized for eight days.

On [REDACTED] at 12:35 PM Administrator stated that she had just created an Evaluation and Assessment tool from another document, but that she would contact a company that provides services to the residents to see if they could provide the facility with their wandering/elopement assessment tool to evaluate the residents.

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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On . . . at 1:01 PM Administrator stated that as per the doctor none of those residents had elopement risk but they decided to place them on the list because of their histories. Also stated that she is in the process of installing a buzz at the door to allow the resident to go in and out with the staff knowing, because they keep telling the residents that they need to let the staff know when they go in and out and some of them refused to let them know. She also stated that she spoke to Resident # 3 and that she told him that he cannot sleep over at the park and that if he does not follow the policies he will be given a 45 days-notice. Uncorrected Class III		

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Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS

Based on record review and interview, the facility failed to obtain a new background screening for a staff person who'd had a break in service of more than 90 days.

Findings included:

Review of the personnel records revealed Staff N was hired on _____, level II background screening was completed on _____. Revealed her employment history does not show any other employment where she required a level II background screening.

On _____ at 12:20 PM Administrator stated, "I thought that her background was still good."

On _____ at 12:50 PM Staff N stated on the phone that she worked in a factory for the last 2 years.

Unclassified