STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964681	**10/04/2018**
NAME OF PROVIDER OR SUPPLIER **CORAL TERRACE ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **6744 SW 22 STREET** **MIAMI, FL 33155**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on . . . . . Coral Terrace ALF Inc (License # 9226) had deficiencies at the time of the survey:

0004 - Licensure - Requirements - 58A-5.016 FAC

Based on record review and interview, the facility failed to provide documentation of a current annual sanitation inspection.

Findings Included:

A review of the facility's annual inspections records on . . . . revealed that its annual sanitation inspections dated was expired.

In an interview on at 9:28 AM, the Administrator stated "the inspector came in the day before yesterday; he supposed to send the result to me by email today."

Class III

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on record review and interview, facility failed to ensure that its administrator did not . . . . . serve as the assistant administrator of another facility.

Findings included:

A review of the Background Screening Clearinghouse Database on . . . . . revealed that the facility's Administrator was also listed as the Assistant Administrator at another facility .

During an interview on at 10:16 AM, the Administrator stated "I am the assistant administrator at the other facility." The Administrator added "I am just the alternate administrator."

During the exit interview on . . . . . at 10:54 AM, the Administrator stated "I removed my name from the other facility's roster ."

Class III

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0090 - Training - - 58A-5.0191(11) FAC

Based on record review and interview, the facility failed ensure that one of three sampled staff (Staff C) understood the facility's policies, procedures and training regarding ( ). Staff C, who worked the overnight shift alone, was unable to describe what a was or the facility's procedure.

Findings included:

Review of Staff C's record showed a hire date of and training dated .

On , 2018 at 7:45 AM, Staff C stated, "No, I do not know what is." After it was explained, Staff C stated, "I do not know who has or do not have it."

On , 2018 at 10:29 AM, the Administrator stated, "Right now, no one has , if a resident has , then we tell all staff."

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation and interview, the facility failed to ensure that monoxide detectors were installed onsite.

Findings:

On at 9:00 am, observed that there were no monoxide detectors onsite. At 9:10 am, the Administrator stated that this was correct; the facility had none. He said that he was told he could purchase and install them on his own, and that he would do this, placing them near the generator , but on the inside of the facility.

On 10: , observed the Administrator installing the monoxide detectors (corrected onsite during the inspection).

Class III