STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967124	**11/05/2018**
NAME OF PROVIDER OR SUPPLIER **ZUNI ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **370 NW 133RD PLACE** **MIAMI, FL 33182**	

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

0000 - Initial Comments

A monitoring survey was conducted on , 2018 and concluded on , 2018 at Zuni ALF, Inc. (license number 11226). The facility had the following deficiencies identified at the time of survey:

0007 - Admissions - Criteria - 429.26(11) FS; 58A-5.0181(1) FAC

Based on observation, record review, and interview, the facility failed to ensure that one of four sampled residents met admission criteria prior to be admitted to the facility.

Findings included:

On , 2018 at 7:20 AM, observed hospice Resident 3 lying on a bed with full rails and a sofa in front of the bed making it difficult for the resident to get up from the bed.

Record review revealed Resident 3 was admitted to the facility on . Resident 3's health assessment dated documented the resident was at high risk of and an elopement risk. The resident required total care to transfer.

Review of Resident 3's admission hospice record dated showed the following diagnoses degenerative of nervous system, , , and secondary , . Bed/Chair bound.

On , 2018 at 11:42 AM, Staff A stated, "Resident 3 came from the hospital in hospice and bedbound but is doing a lot better." On , 2018 at 11:57 AM, Staff A stated, "The resident came from the hospital already in hospice with a ( ) signed."

Class III

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

Based on observations, interview, and record review, the facility failed to have written notes after one of four sampled residents were transferred to the hospital and returned on hospice care (Resident 3).

Findings included:

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On , 2018 at 7:20 AM, observed hospice Resident 3 lying on a bed with full rails and a sofa in front of the bed making it difficult for the resident to get up from the bed.

On , 2018 at 11:42 AM, Staff A stated, "Resident 3 came from the hospital in hospice and bedbound but is doing a lot better." On , 2018 at 11:57 AM, Staff A stated, "The resident came from the hospital already in hospice with a ( ) signed."

Record review revealed Resident 3 was admitted to the facility on . Resident 3's health assessment dated documented the resident was at high risk of and an elopement risk. The resident required total care to transfer.

Review of Resident 3's admission hospice record dated showed the following diagnoses degenerative of nervous system, and secondary . Bed/Chair bound.

Hospital records received on revealed Resident 3 was admitted on . Admission notes documented, "patient has been more than usual.

Class III

0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28(1-2) FS

Based on observation, interview, and record review, the facility failed to provide an environment free of physical restrains to one of four sampled residents (Resident 3).

Findings included:

On , 2018 at 7:20 AM, observed hospice Resident 3 on a bed with full rails and a sofa located by the bed making it impossible for the resident to get up.

On , 2018 at 7:20 AM, Staff C stated, "Resident 3 still walks; the doctor is going to order a different rail, so the resident cannot get up at night; that is why we put the sofa."

Resident 3's health assessment dated documented the resident was at high risk of and an elopement risk. The resident required total care to transfer.

Class III

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

Based on record review and interview, the facility failed to have an updated health assessment for one of four residents who was admitted to hospice and required total care (Resident 3). The facility also failed to have evidence of a power of attorney (POA) for one of four sampled residents (Resident 3).

Findings included:

1) On , 2018 at 7:20 AM, observed hospice Resident 3 lying on a bed with full rails and a sofa in front of the bed making it difficult for the resident to get up from the bed.

Review of Resident 3's admission hospice record dated showed the following diagnoses degenerative of nervous system, and secondary . Bed/Chair bound.

Record review revealed Resident 3 was admitted to the facility on . Resident 3's health assessment dated documented the resident was at high risk of and an elopement risk. The resident required total care to transfer and assistance with the remaining activities of daily living. The facility did not have an updated health assessment for Resident 3.

On , 2018 at 11:42 AM, the new Owner stated, "Resident 3 came from the hospital in hospice and bedbound but is doing a lot better; now the resident recognizes us and the family. The resident eats puree and the doctor prescribed the nutritional milk.

2) Record review showed a signed by a person who the facility did not have evidence of a power of attorney for.

On , 2018 at 11:57 AM, the new Owner stated, "The resident came from the hospital already in hospice with a signed."

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, record review and interview the facility failed to store a minimum amounts of fuel supply (48 hrs.) on the property. The facility failed to provide a detailed written policies and procedures to serve as a supplement to its Comprehensive Emergency Management Plan (CEMP) that should be

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available for inspection by each resident or each resident's legal representative. The facility failed to notify within 5 business days in writing each resident and the resident's legal representative of the existence of the equipment. The facility failed to provide the required monoxide detector.

Findings included:

On , 2018 at 10:45 AM , observed outside the facility a portable generator stored inside a shed. The facility failed to store a minimum amounts of fuel supply for 48 hours. Observed inside the facility, no proof of a monoxide detector.

Record review showed an emergency power plan submission approval of . Record review of the facility showed no proof of written policies and procedures. Record review of all residents showed no written notice of equipment.

On , 2018 at 10:45 AM, the new Owner stated that due to be new in the business, they were still working on all the details of running an assisted living facility and that they would comply with any regulation.

Class III

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Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on observation, record review, and interview, the facility failed to provide proof of an eligible level 2 background screening for one of three sampled staff (Staff C).

Findings included:

On , 2018 at 6:57 AM, Staff C answered the facility's front door and stated that at the moment was working alone with four residents, one of them in hospice.

On , 2018 at 6:57 AM, Staff C stated, "I have been here since or so; I sleep here."

Review of Staff C's passport showed an immigrant visa from United States issued and expiration date of .

On , 2018 from 7:00 AM to 10:00 AM, observed Staff C providing services to all residents, preparing and serving breakfast, cleaning the residents's , assisting with ambulation, transferring, dressing.

Review of background screening clearinghouse showed Staff C did not have an eligible screening.

Review of Staff C's facility records showed, an application dated

On , 2018 at 8:52 AM, Resident 4 stated, "I know Staff C, the staff has been here around 2 months."

Unclassified