| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | **AL11965974** | **11/08/2018** |
| NAME OF PROVIDER OR SUPPLIER<br>**HOME LOVING CARE INC** | STREET ADDRESS, CITY, STATE, ZIP CODE<br>**4321 SW 133 AVENUE**<br>**MIAMI, FL 33175** | |

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

**0000 - Initial Comments**

A Standard Biennial Survey was conducted on , . Home Loving Care Inc. had deficiencies identified at the time of the survey:

**0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC**

Based on observation and interview, the facility failed to keep the medications locked at all times.

Findings included:

On arrived to the facility at 8:45 AM and the medication cabinet in the dining room was not locked.

On at 8:55 AM Staff C stated that she had lost the key of the medication cabinet in the morning and was still looking for it, but that she was not leaving the medication cabinet out of sight.

On at 11:57 AM Staff B's husband brought a new lock for the medication cabinet.

Class III

**0077 - Staffing Standards - Administrators - 429.176 FS; 429.52( ),58A-5.019(1) FAC**

Based on record review and interview, the Administrator, who supervised more than one Assisted Living Facility, failed to appoint in writing a separate manager for each site.

Findings included:

Review of the Florida Health Finder database revealed that the Administrator operated another assisted living facility.

On at 10:50 AM Staff B stated that the Administrator also operated another assisted living facility and that she only had a manager at the other facility.

Class III

**0081 - Training - Staff In-Service - 58A-5.0191( ) FAC**

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

Based on record review and interview, the facility failed to provide a pre-service orientation of at least 2 hours prior to interacting with residents for one out of seven sampled staff (Staff D).

Findings included:

Personnel record review revealed that Staff D was hired on 11/07/18. There was no documentation of a pre-service orientation in the file.

On at 1:40 PM Staff D stated that she was training for 2 weeks three times a week and had started full time on .

On at 1:41 PM Staff B stated that she would ensure that Staff D got the pre-service orientation.

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 clean and safe living environment.

Findings included:

On arrived to the facility at 8:45 AM and observed that there were yellow stains on the ceiling in the living room and the kitchen. Observed at approximately 8:55 AM in the backyard a hospital bed reclined against the wall. Also there was debris, broken furniture, boxes, a cooler and full garbage bags in a pile in the backyard.

On at 8:46 AM Staff C stated that the roof had been already fixed but they had not painted because they were in the process of remodeling the house.

On at 8:55 AM Staff C stated that they were going to put the bed inside the shed but they have to empty it first, and that the pile in the backyard was garbage that was going to be picked up.

Class III

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

Based on record review and interview, the facility failed to keep an up-to-date admission / discharge log.

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| NAME OF PROVIDER OR SUPPLIER<br>**HOME LOVING CARE INC** | STREET ADDRESS, CITY, STATE, ZIP CODE<br>**4321 SW 133 AVENUE**<br>**MIAMI, FL 33175** | |

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

Findings included:

Review of the admission / discharge log revealed that Resident # 5 was not listed.

On . . . . at 10:30 AM Staff B stated that Resident # 5 had been admitted on . . . . . .

Class III

**0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC**

Based on record review and interview, the facility failed to have an employment application, with references furnished, for two out of seven sampled staff (D and G).

Findings included:

Review of Staff D's personnel record revealed that there was no application for employment.

On . . . . at 1:10 PM, Staff B stated, "she started yesterday, she is missing some stuff."

Review of the personnel record of Staff G revealed that he employment application had no references.

On . . . . at 1:40 PM Staff B stated, "I will tell her."

Class III

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

Based on observation, record review and interview the facility failed to maintained resident records onsite for one out of six sampled residents (# 5). The facility also failed to provide documentation of a doctor's order or a consent for the use of side rails for one out of six sampled residents (# 5).

Findings included:

1) On . . . . at 8:45 AM arrived to the facility and observed Resident # 5 in the living room watching TV.

On . . . . at 10:30 AM Staff B stated that she did not have the record of Resident # 5 at the facility

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

because the resident's son had taken the whole record with him to sign it and has not been able to bring it . . . .

2) During tour of the facility on . . . . . at 8:50 AM observed that the bed belonging to Resident # 5 in # had full side rails attached.

Record review revealed that the resident was not under hospice services and there was no prescription and no consent for full side rails.

On . . . . at 8:56 AM Staff C stated, "She uses the side rail but that is the bed that the clinic sent."

Class III