STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968284	R **11/08/2018**
NAME OF PROVIDER OR SUPPLIER **DANIELLA'S LIFE ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **1910 W FERN ST** **TAMPA, FL 33604**	

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

Z813 - Results of Screening & Notification In File - 59A-35.090(3)(c), FAC

Based on employee record review and interview, the facility failed to maintain the eligibility results of the employee Level II Background Screening for one (Staff A) and the signed Attestation for two (Administrator, Manager) of three employee records reviewed.

Findings Included:

Employee record review conducted on revealed there were no results of Staff A's Level II Background screening in their employee file.

Employee record review conducted on revealed there was no signed Attestation for the Administrator and the Manager in their employee files.

Interview with Administrator was conducted on 11/08/2018 at 2:05pm. The Administrator confirmed there was no evidence of the Level II Background screening for Staff A and the signed Attestation in the file for themselves and the Manager. No other documentation was provided.

Unclassified

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on employee record review and interview, the facility failed to maintain an up-to-date Background Screening (BGS) Roster.

Findings Included:

Record review of the Facility's BGS Roster conducted on revealed Staff B hired on had no end date.

An interview with Administrator was conducted on 11/08/2018 at 2:05pm. The Administrator stated they had not updated the roster since Staff B ended their employment more than ten days ago.

Unclassified

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0000 - Initial Comments

Assisted Living Facility

On , a revisit to a complaint survey (CCR#2018011294) was conducted in conjunction with a Complaint survey (CCR#2018015749) at Daniella's Life Assisted Living Facility. The facility had deficiencies at the time of the visit.

(license #12212)

0008 - Admissions - Health Assessment - 429.26( ) FS; 58A-5.0181(2) FAC

Based on record review and interview, the facility failed to obtain complete documentation of a -to- health assessment for 2 residents (#1 and #6) out of 4 records reviewed.

Findings included:

Focused resident record review revealed Resident #1 had an incomplete health assessment.

Focused resident record review revealed Resident #6 did not have a health assessment on file.

Interview with the Administrator was conducted on 11/08/2018 beginning at 11:57am. The Administrator confirmed Resident #1 had not had a -to- medical examination with a physician in order to complete the resident's health assessment.

Interview with the Administrator was conducted on 11/8/2018 at 1:25pm. The Administrator reviewed the file for Resident #6 and confirmed there was no health assessment for Resident #6 on file.

Class III

0009 - Admissions - Admission Package - 58A-5.0181(3) FAC; 400.0078(2)

Based on interview and record review, the facility failed to obtain complete resident contracts for 3 (#1, #6 and #7) out of 4 resident record reviewed.

Findings Included:

Record review conducted on revealed an incomplete facility resident contract for Resident #1 on file.

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Record review conducted on . . . . revealed an incomplete facility resident contract for Resident #6 on file.

Record review conducted on revealed an incomplete facility resident contract for Resident #7 on file.

All three contracts for residents #1, 6 and 7 were missing the dates the contracts were executed.

Interview with the Administrator was conducted on 11/8/2018 at 1:25pm. The Administrator reviewed files and confirmed the contracts for Resident #1, 6, and #7 were incomplete.

Class III

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on record review and interview, the facility failed to maintain documentation and progress notes for 1 (#1) resident with a , ...

Findings Included:

Focused record review revealed that the record for Resident #1 indicated the resident had , ... on their right heel, left ankle, and right ankle. Further record review revealed there was no indication of the stage of the , ... and there were no documentation in the resident record to provide the progress of the , as far as stages of healing.

An interview was conducted on at 11:43am with the Administrator. The administrator confirmed there was no documentation in the resident's file regarding the progress of the , ... for Resident #1.

Class III

0052 - Medication - Assistance with Self-Admin - 58A-5.0185 (3)

Based on observation and interview the facility failed to follow the procedures under 429.256 Florida Statute in assistance with self-administration of medication for 2 of 2 (#6, #8) residents observed.

Findings included:

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During an observation of assistance with self-administration of medication on at 11:20 AM (#6) and 11:25 AM (#8) conducted by the Manager of the facility, they did not compare the medication observation record (MOR) to the mediation label, did not read the label aloud to the residents and did not ensure the resident took the medication before walking away.

During an interview with the Administrator on 11/8/18 at 11:45 AM, it was explained that the Manager did not follow the required procedure in providing assistance with self-administration of medication. They stated, "okay."

Class III

0053 - Medication - Administration - 58A-5.0185(4) FAC

Based on record review and interview the facility failed to ensure only licensed staff provide medication administration to 1 (#1) of 6 residents who currently reside in the facility.

Findings included:

During a review of Resident #1's Health Assessment on 11/8/18, it was not dated and stated Resident #1 required medication administration.

During an interview with the Administrator on 11/8/18 at 11:08 AM they stated, "We give her (Resident #1) the medication. We crush her meds and give it to her in a spoon. We administer her the medication." "No, We do not have nurses here."

Class III

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

Based on observation and interview the facility failed to ensure the resident's medications were kept in a locked cabinet; locked cart; or other locked storage receptacle, room, or area at all times.

Findings Include:

During a tour of the facility on an unattended black cart was observed in the kitchen. The cart contained the day care residents bubble packaged medications and was unlocked.

At 11:05 AM the Administrator was shown the unsecured medications in the cart. The Administrator acknowledged the cart contained unsecured medications and then asked Staff A why the cart was

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unlocked.

Class III

0058 - Pharmacy & Dietary; Uncorrected Deficiencies - 429.42( ) FS; 58A-5.033(3)(a) FAC

Based on observation, interview and record review, the facility failed to correct medication related deficiencies by failing to ensure unlicensed staff followed required steps in 429.256 FS and failing to ensure only licensed personnel administered medications to residents.

Findings included:

On , the facility was cited for two medication related deficiencies.

During an observation of assistance with self-administration of medication on at 11:20 AM (#6) and 11:25 AM (#8) conducted by the Manager of the facility, they did not compare the medication observation record (MOR) to the mediation label, did not read the label aloud to the residents and did not ensure the resident took the medication before walking away.

During a review of Resident #1's Health Assessment on 11/8/18, it was not dated and stated Resident #1 required medication administration.

During an interview with the Administrator on 11/8/18 at 11:08 AM they stated, "We give her (Resident #1) the medication. We crush her meds and give it to her in a spoon. We administer her the medication." "No, we do not have nurses here."

This serves as notification of the requirement of the faciltiy to contract with a licensed nurse or registered pharmacist.

Class III

0079 - Staffing Standards - Levels - 58A-5.019(3) FAC

Based on record review and interview the facility failed to ensure they maintained an accurate direct care staffing schedule.

Findings included:

During a review of the direct care staffing schedule it did not identify the names of the

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employees scheduled for each shift. It revealed the manager is scheduled daily from 11 PM-7 AM although, they are also scheduled during the same hours for another assisted living facility where they are the administrator of record.

During an interview with the Administrator on 11/8/18 at 12:02 PM they stated they would identify the employees on the schedule.

Class III

0080 - Training - Core & Competency Test - 429.52( ) FS; 58A-5.0191(1) FAC

Based on interview and record review, the facility's administrator failed to meet the training and testing requirements for an administrator of an assisted living facility. The administrator failed to complete the core competency exam within the required timeframe.

Findings included:

Record review of the Administrator's personnel file on revealed that the Facility's Administrator was the administrator of record since . During the record review no documentation showing completion of the core competency exam was found.

During interview with the Administrator on 11/08/2018, at 11:57 a.m., the Administrator stated that they had the training, but had not requested to take the exam yet.

Class III

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

Based on observation and interview, the facility failed to ensure that each resident was provided with a designated bed for sleeping. One resident (#3) used a loveseat/pullout bed for sleeping.

Findings included:

Interview conducted on at 10:40am with Resident #5 revealed she shares her room with two other residents. There are two beds and the third resident (#3) sleeps on the red love seat that pulls out to a bed.

Interview conducted on at 10:42am with Resident #3 revealed she sleeps in # with two other female residents and she sleeps on the red love seat.

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An interview was conducted with the facility's manager conducted on . . . . . at 11:10am. During the interview, the manager confirmed that Resident #3 sleeps on the red loveseat and shares a room with two other female residents.

During a walkthrough of the facility conducted on at 11:20am Resident #3 was observed laying on the love seat watching television with Resident #5.

Class III

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

Based on employee record review and interview, the facility failed to maintain references for three (Administrator, Manager, Staff A) of three employee records reviewed.

Findings Included:

Record review conducted on . . . . . revealed there were no references in the employee file for the Administrator.

Record review conducted on revealed there were no references in the employee file for the Manager.

Record review conducted on . . . . . revealed there were no references in the employee file for Staff A.

An interview with the Administrator was conducted on 11/08/2018 at 2:05pm. The Administrator confirmed there were no references for the three staff. No other documentation was provided.

Class III