STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967035	**12/05/2018**
NAME OF PROVIDER OR SUPPLIER **SWEET ... ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **15942 SW 61 LANE** **MIAMI, FL 33193**	

SUMMARY STATEMENT OF DEFICIENCIES
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0000 - Initial Comments

A Standard Biennial Licensure Survey was conducted on 11/28/2018 and concluded . . . . . Sweet ALF, Inc. had the following deficiencies identified at the time of the survey.

0026 - Resident Care - Social & Leisure Activities - 58A-5.0182(2) FAC

Based on observation, record review, and interview the facility failed to provide social, recreational or educational, and other activities for all residents.

Findings included:

A review of the facility's bulletin board revealed activities calendar for . . . . . , . . had scheduled activities: Exercising AM.

On during survey from 9:20 AM to 1:40 PM, observed there were no activities announced or conducted.

On . . . . . at 11:08 AM Resident #2 stated "They do not have any activities."

On . . . . . at 11:10 AM Resident #4 stated "We do not have any activities here."

On . . . . . at 4:11 PM Resident #5 stated "there are no activities provided."

Class III

0052 - Medication - Assistance with Self-Admin - 429.256( ); 58A-5.0185 (3)

Based on observation and interview the facility failed to follow the correct procedure as outlined in section 429.456 of Florida Statutes, when assisting 1 out of 1 sampled resident with self-administration of medications (Resident #3). The staff failed to give medication to residents during the window time of one hour before or one after medication time is prescribed and failed to state the name of the medication to the resident.

Findings Included:

at 10:05 AM, observed Staff B assisting with self-administered medications to Resident #3.

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The staff put on gloves, from packet she placed the medication in a small plastic cup, and handed the cup of medication and a cup of water to the resident. The staff did not state the name of the medication to the resident.

The resident had prescribed Tradjenta 5 MG, Propanol 10 MG, 100 MG, 50 MCG, 50 MG, 100 MG at 8:00 AM.

On at 9:58 AM Staff B, stated that she was late giving Resident #3 the medication because the resident woke up late and she was busy assisting the resident in the bathroom.

Class III

0054 - Medication - Records - 58A-5.0185(5) FAC

Based on record review and interview the facility failed to maintain an accurate Medication Observation Record (MOR) for five out of six sampled residents (Residents #1, #3, #4, #5, and #6)

Findings included:

A review of Medication Observation Record revealed medication observation record was not initialed for date of at 8:00 AM.

Reconciliation of medication showed the medications labeled "morning" for was not in the medication packets for Residents #1, #3, #4, #5, and #6.

Resident #3 had prescribed Tradjenta 5 MG, Propanolol 10 MG, 100 MG, 50 MCG, 50 MG, and Allupirinol 100 MG.
Resident #4 had prescribed 100 MCG.
Resident #5 had prescribed 100 MG. had prescribed Low 81 MG, 1 MG, 10 MG, Megestrol 40 MG, 50 MG, 40 MG, and Virt-Caps Soft Gels.
Resident #6 had prescribed Amlopidine 10 MG, 81 MG, 10 MG, 200 MG, 75 MG, 20 MG, D3, - , 25-100 MG, 10 MG, and 500 MG.

On at 11:00 AM Staff B stated she had forgot to sign the medication observation book, but that she had gave the residents their medications."

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Class III

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

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

Findings included:

On at 9:38 AM observed a medication box in refrigerator unlocked with inside.

On at 9:40 AM Staff B revealed the medication belonged to a previous resident and that the facility was waiting for the pharmacy to discard it.

Class III

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review and interview the facility failed to have proof of documentation of freedom from signs and symptoms of communicable and results for exam for 1 out 6 sampled Staff (Staff F).

Findings included:

Record review showed Staff F did not have proof of documentation of freedom from signs and symptoms of communicable and results for tuberculoses exam in file.

On at 1:12 PM the administrator stated she was aware Staff F did not have the documentation of freedom from signs and symptoms of communicable and exam in file. She stated Staff F have been working intermittently at the facility since .

Class III

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

Based on observation, record review, and interview the facility failed to have an accurate written work schedule that reflects its 24-hour staffing pattern and to have enough staff to provide care for residents' scheduled and unscheduled service needs.

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Findings included:

On . . . . . at 9:20 AM during the facility tour observed Staff B alone assisting residents.

During the tour of the facility on . . . . . At 9:23 AM Staff B stated that she was unable to conduct tour because she was the only staff available and she was assisting Resident #3 in the bathroom.

A review of the facility Staff Schedule Posted for , had Staff C was scheduled from 7:00 AM-7:00 PM and Staff F 7:00 PM-7:00 AM. Staff schedule posted did not have Staff B reflected on staff schedule.

Class III

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

Based on record review and interview the facility failed to ensure 2 out of 6 sampled staff had the required staff in-service training (Staff B and F).

Findings included:

Review of Employee B file showed a nutritional and safe food handling training certificate which not properly signed by the trainer.

On . . . . . at 1:12 PM the administrator stated she was not aware the certificate was not properly signed and she will call her consultant and get the correct certificate.

Review of Staff F file showed no documentation of having the required preservice orientation prior to interacting with residents, in-service training's in . . . . . control including universal precautions and facility sanitation procedures before providing personal care to the residents, 1 hour in-service training in reporting adverse incidents, facility emergency procedures, resident rights in an assisted living facility, recognizing and reporting resident , neglect and , , safe food handling practices and 3 hours of in-service training in resident behavior and needs, providing assistance with daily living and elopement response policies. (Staff F)

On , around 1:12 PM the administrator stated she is aware Staff F do not have the in-service training requirements. She stated Staff F have been working intermittently at the facility since

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, and she is in the process of scheduling the required in-service training's.

Class III

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(6) FAC 429.52 (6), FS

Based on record review and interview the facility failed to ensure that 3 out of 6 sampled staff received a minimum of 2 hours of continuing education training on providing assistance with self- administered medications (Staff C, D, and F).

Findings included:

Record review found the facility did not have Staff C, D, and F's additional 2 hours of continuing education training on providing assistance with self-administration medications.

On , at 1:12 PM the administrator stated she forgot about the additional requirement for the 2 hours training for self-administration medications but she will schedule the training.

Class III

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

Based on record review and interview the facility failed to provide proof of completed ( ) training for 1 out of 6 sampled Staff (Staff F).

Findings included:

Record review showed Staff F did not have in file proof of documentation as receiving the training.

On , around 1:12 PM the administrator stated she is ware that Staff F do not have the training and is in the process of scheduling training.

Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on observation and record review, the facility failed to provide substitutions of equal nutritive

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value.

Findings included:

On at 9:30 AM observed breakfast served to Resident #3. The breakfast included two pieces of toast with butter and juice.

A review of the menu posted for breakfast was: Juice (4 oz.) Dry Cereal (cup) Bread (1 slice) Margarine (1 Tbsp.) Milk (8 oz.).

On at 9:35 AM Staff B stated Resident #3 was okay with the breakfast that was served.

Class III

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

Based on record review and interview the facility failed to maintain personnel records that contain a copy of the employment application and references for 1 out 6 sampled Staff (Staff F).

Findings Included:

Record review showed Staff F did not have an employment application with references on file.

On , at 1:12 PM the administrator stated she was aware that Staff F did not have an employment application on file. She stated she is in the process of updating Staff F employee file

Class III

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

Based on record review and interview the facility failed to have a completed health assessment completed by healthcare provider for 1 out of 6 sampled residents (Resident #1). The facility failed to have recorded at admission and semi-annually for 1 out of 6 sampled residents (Resident #1).

Findings included:

A review of Resident #1's health assessment showed the resident's and were not documented on the form. Further review of the resident's file showed there was no documentation of the

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recorded semi-annually. The health assessment also did not document the type of diet the resident requires.

A review of Resident #1's Hospice record did not have or measurements documented on the hospice care plan dated .

On at 1:15 PM the administrator stated that hospice was supposed to record Resident #1's because he is bedridden and the facility is unable to him on a scale. She also stated that health assessment is completed by the doctor, and the doctor must have forgot to complete the special diet instructions.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, record review, and interview, the facility failed to have the generator at least 10 from the facility. The facility failed to obtain the required fuel at the facility to ensure that in the event of the loss of primary electrical power there is sufficient fuel readily available to maintain temperatures at or below 81 degrees for residents.

Findings included:

On at 12:49 PM observed generator in a closet in # . The facility also failed to have the required fuel onsite.

On at 1:10 PM the administrator stated that she did not placed the generator outside because she was removing the shed from outside and the generator might get damaged being outdoors without a protective covering. She also confirmed there was no fuel onsite.

Class III

L243 - LMH - Training - 429.075(1) FS; 58A-5.0191(9) FAC

Based on record review and interview the facility failed to ensure that 1 out of 6 sampled Staff receive the limited mental health training (Staff F).

Findings Included:

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Record review revealed Staff F did not have proof of receiving the limited mental health training in file .

On , at around 1:12 PM the administrator stated she is aware Staff F did not receive the limited mental health training and she is in the process of scheduling the training. She stated Staff F have been working intermittently at the facility since , .

Class III

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

Based on record review and interview the facility failed to register all employees in the Background Screening's Clearinghouse employee roster for one out of six sampled staff (Staff B).

Findings included:

A review of the Background Screening's Clearinghouse database showed Staff B was not listed on the facility's roster.

On ..... at 1:30 PM the administrator stated "all of the employees should be added to the roster."

Unclassified

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c); 59A-35.090(2)(d)-(3)

Based on record review and interview the facility failed to have provided proof of the Attestation of Compliance form signed and dated for 1 out of 6 Staff (Staff F).

Findings included:

Review of Staff F's record showed it did not have an Attestation of Compliance form signed and dated on file.

On ....., ... at 1:12 PM the administrator stated she thought that Staff F had the Attestation of Compliance form on file.

Class III

Z824 - Right of Inspection; Inspection Reports - 408.811 FS; 59A-35.120 FAC

Based on interview and observation the facility failed to provide timely access to the facility for an unannounced compliance inspection.

Findings included:

During the tour of the facility on ... At 9:23 AM Staff B stated that she was unable to conduct a

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tour of the facility because she was the only staff available and she was assisting Resident #3 in the bathroom.

On [redacted] at 9:53 AM, requested facility records from Staff B. Staff B stated that the administrator had the records in the office and that the administrator was the one that knew where they were.

On [redacted] at 9:30 AM during facility tour observed not labeled observed this was the office were files were kept.

Unclassified