STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969161	**12/27/2018**
NAME OF PROVIDER OR SUPPLIER **LLINA'S ALF LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **28122 SW 160 CT** **HOMESTEAD, FL 33033**	

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

0000 - Initial Comments

A standard biennial survey was conducted on , and concluded on , . Llina's Alf Llc., with a limited mental health component, had the following deficiencies identified at the time of the survey:

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

Based on observation, record review and interview, the Assisted Living Facility failed to ensure that each resident has a completed health assessment (AHCA form 1823) within 60 days before the admission of the resident to the facility or within 30 days following the admission to the facility by a licensed physician, licensed physician assistant, or licensed nurse practitioner for one out of eight sampled residents (#3).

Findings included:

On at 7:03 AM, Resident #3 rested in bed in # .

Review of the facility's admission and discharge log showed that Resident #3 was admitted on .

Review of Resident #3's record showed two admission dates: and on . There was one health assessment in the resident's record, dated .

On at 12:46 PM, the Administrator revealed that Resident #3 moved to the facility at the end of 2017, then she moved out of the facility. The resident was discharged around , . It happened twice, first for a short period of time and then for a little longer. She returned to the facility on . There was no new health assessment for the resident, and no new contract. There was no documentation for all those times that the resident left.

Class III

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

Based on observation, record review and interview, the Assisted Living Facility failed to complete an admission package at the time of the admission for one out of eight sampled residents (#3).

Findings included:

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On at 7:03 AM, Resident #3 rested on bed in # .

Review of facility's admission and discharge log showed that Resident #3's admission date was on . There was no previous entrance for Resident #3.

Review of Resident #3's record showed two admission dates; they were on and on . There was on health assessment on the resident's record. It showed completion date on . The service agreement, the same document, was signed on and reviewed on but it showed different rates. On , the rate was $3,000 monthly and on , the rate was $2,000 monthly.

On at 12:46 PM, the administrator revealed that Resident #3 moved to the facility at the end of 2017 then she moved out of the facility. The resident was discharged around , . It happened twice, first for a short period of time and then for a little longer. She returned to the facility on , exactly on . There was no new health assessment for the resident, no new contract. There was no documentation for all those times that the resident left.

Class III

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

Based on record review and interview, the Assisted Living Facility failed to maintain an updated written record for two out of eight sampled residents (#3 and #4).

Findings included:

1. Review of Resident #3's record showed two admission dates: and . There was a progress note on showing that the resident moved in the facility on . There was a progress note on showing that she did not want take the psych medication and the facility was in contact with the psychiatrist. There was a progress note on showing that the resident changed insurance and doctor; she had some behavior problems and there was communication with the doctors. The next progress note was on /8 showing that the resident was discharged before but returned on .

Review of Resident #3's Medication Observation Record (MOR) showed that staff initialed the medication sas taken from to . Staff initialed MORs from to for medications from to ; then Staff resumed initialing MORs on . There were no

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MORs for the period of , , and .

On at 12:46 PM the administrator revealed that Resident #3 moved to the facility at the end of 2017 then she moved out of the facility, was discharged, around , . It happened twice, first for a short period of time and then for a little longer. She returned to the facility on , exactly on . There was no documentation for all those times that the resident left.

2. Review of Resident #4's record showed that admission date to facility was on . Progress notes in record did not show that the resident was at hospital.

On at 9:52 AM, Resident #4's daughter revealed that the facility called her and informed when the resident was going to the hospital.

Review of Resident #4's discharge summary from the hospital showed that she was admitted to the hospital on and discharged on .

Class III

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

Based on record review and interview, the Assisted Living Facility failed to ensure that staff have a negative examination completed on annual basis for one (Staff B) out of two staff.

Findings included:

Review of Staff B's personnel record showed that hire date was on . The annual negative examination for Staff B was on 11/14/17 and expired on .

On at 11:11 AM, the Administrator revealed that Staff B did not have a new annual test.

Class III

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

Based on observation, record review and interview, the Assisted Living Facility failed to have an updated admission and discharge log listing the name of all the residents and each resident with the admission date and discharge date for one out of eight sampled residents (#3). The facility failed to identify the

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facility or home address to which the resident was discharged for four out of eight sampled residents (#5, #6, #7, and #8).

Findings included:

1. On at 7:03 AM, Resident #3 rested on bed in #.

Review of facility's admission and discharge log showed that Resident #3's admission date was on . There was no previous entrance for Resident #3.

Review of Resident #3's record showed two admission dates: and on .

On at 12:46 PM, the Administrator revealed that Resident #3 moved to the facility at the end of 2017 then she moved out of the facility. The resident was discharged around , . It happened twice, first for a short period of time and then for a little longer. She returned to the facility on , , exactly on . There was no new health assessment for the resident, no new contract. There was no documentation for all those times that the resident left.

2. Review of facility's admission and discharge log showed that Resident #5's discharge date was on and there was no documentation about the home address to which the resident was discharged to.

Review of facility's admission and discharge log showed that Resident #6's discharge date was on and there was no documentation about where the resident was discharged to.

Review of facility's admission and discharge log showed that Resident #7's discharge date was on and there was no documentation about the facility where the resident was discharged to.

Review of facility's admission and discharge log showed that Resident #8's discharge date was on and there was no documentation about the facility where the resident was discharged to.

Class III

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

Based on record review and interview, the Assisted Living Facility failed to ensure that one out of two sampled staff received a minimum of 6 hours of specialized training in working with individuals with

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mental health diagnoses within 6 months of employment in a limited mental health facility (B).

Findings included:

Review of Staff B's personnel record showed that the hire date was on . There was no documentation that Staff B completed a minimum of six hours Limited Mental Health (LMH) training.

On at 2:06 PM, the administrator revealed that Staff B missed the LMH training.

Class III