STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964920	**12/11/2018**
NAME OF PROVIDER OR SUPPLIER **A HOME AWAY FROM HOME ALF INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1851 SW 142nd AVENUE MIAMI, FL 33175**	

SUMMARY STATEMENT OF DEFICIENCIES
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Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on observation, record review and interview the facility failed to have one out of three (Staff B) of the current employees registered on the background screening roster.

Findings included:

On at 9:00 AM, observed Staff B in the facility, alone with one resident. No staff schedule was posted to verify who was working in the facility. Staff C arrived to the facility at 10:30 AM. On 18 at 1:38 PM Staff C stated, "She (Staff B) has been working here for two months."

A review of the background screening database found Staff B was not listed on the employee roster.

On at 3:30 PM with the Administrator acknowledged Staff B was not on the employee roster.

Unclassified

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

Based on record review and interview, the facility failed to ensure that one out of three (Staff B) sampled staff had an eligible Level II background screening before providing services to residents.

Findings included:

On at 9:00 AM Staff B was in facility alone with one resident. The facility had no staff schedule posted and available on to verify who was working in the facility. Staff C arrived to the facility at 10:30 AM. On 18 at 1:38 PM Staff C stated, "She (Staff B) has been working here for two months."

A review of Staff B's record and of the background sceening clearinghouse database found no documentation of a current screening.

On at 3:30 PM, the Administrator stated, "I thought it was in her file."

Unclassified

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

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Based on record review and interview, the facility failed to provide documentation of a signed background attestation of compliance for three out of three (Staff A, B, and C) sampled staff.

Finding included:

Review of Staff A, B, and C's files revealed no signed background attestation of compliance in their files.

On ... ... at 3:30 PM, the Administrator acknowledged they did not have the attestation.

Class III

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0000 - Initial Comments

A Standard biennial relicensure inspection was conducted at A Home Away From Home ALF. Inc., on . Deficiencies were identified at the time of the inspection:

0004 - Licensure - Requirements - 58A-5.016 FAC

Based on record review and interview, the facility failed to have a satisfactory fire inspection report and health department inspection report available for review.

Finding included:

Review of the fire inspection showed it was dated and expired on . The health department inspection was dated and expired on .

On at 3:30 PM via telephone conversation the Administrator stated, "I have them in my email."

Class III

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

Based on observation, record review, and interview, the facility failed to have written notes for one out of three (Resident #1) sampled residents who had a change in condition and was receiving hospice services.

Findings included:

On at 9:15 AM Resident #1 bed was found with a full bed rail. On at 9:15 AM Staff B stated, "Resident #1 was under hospice care."

Review of resident #1's file found no documentation in progress noted of a change in her condition. The last noted progress note documented was dated . Review of the hospice record revealed Resident #1 was admitted to their care on . Her Initial Plan of Care was completed on . Resident #1's last health assessment was dated . The facility had not updated her health assessment and progress notes to reflect she was receiving hospice services.

On at 3:25 PM via telephone, the Administrator acknowledge Resident# 1's record had to be

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updated.

Class III

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

Based on observation and interview, the facility failed to offer and provide social, recreational or educational, and other activities to the residents and have activity calendar posted that reflected at least 6 days a week for a total of not less than 12 hours of activities per week.

Findings included:

On . . . at 09:00 AM, observed no activities calendar posted. On . . . Resident #1 was observed through our the survey process sitting in the living room watching television.

On at 1:39 PM Resident #1 stated, "They offer me food and to wash my clothes. Those are special activities. Nothing else."

On . . . at 3:30 PM the Administrator acknowledge there were no activities posted and no activities done with residents.

Class III

0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28( ) FS 429.27

Based on observation, record review, and interview the facility failed to have telephone number for lodging complaints against a facility posted in full view in a common area accessible to all residents.

Finding included:

On . . . at 9:00 AM found the facility did not have the complaint hotline and Bill of right posted.

On . . at 3:30 PM the Administrator acknowledged the deficiencies.

Class III

0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC; 429.41(1)(a)3 & 3.(I)

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Based on record review and interview, the facility failed to failed to conduct two elopement drills per year.

Findings included:

A review of facility records showed no documentation of current elopement drills having been conducted. The last elopement drills conducted were dated /16 and .

On at 3:30 PM with the Administrator acknowledged she had not updated the elopement file.

Class III

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

Based on record review and interview the facility failed to maintain the medication administration record (MAR) for one out of three (Resident #1) sampled residents.

Findings included:

Review of Resident #1's medication sheet had no specific times listed for when medications are to be given.

Interview on a 3:30 PM with Administrator acknowledge the medication log did not have the times listed.

Class III

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

Based on observation and interview, the facility failed to ensure medications were stored in a locked receptacle at all times.

Findings included:

On at 9:05 AM the medication cabinet was observed to be unlocked. The cabinet contained medications for Resident #1, 2, and 3. On at 9:08 AM a tour of the kitchen found unlocked medication in the right door of the refrigerator belonging to Resident #1.

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On [redacted] at 3:30 PM, the Administrator acknowledged the medications were found unlocked.

Class III

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

Based on record review and interview the facility failed to have two hours pre-service orientation prior to interacting with residents for one out of five (Staff B) sample staff.

Findings included:

Review of Staff B revealed there was no documentation she had received the two hours pre-service orientation covering resident rights, the facility license type, services offered by the facility prior to interacting with residents.

On [redacted] at 3:25 PM with the Administrator acknowledge she was not aware of the two hour orientation required.

Class III

0083 - Training - First Aid and - 58A-5.0191(5) FAC

Based on record review and interview, the facility failed to ensure that at least one staff person who held a current and valid First Aid and [redacted] ( ) certification was present in the facility at all times.

Findings included:

Observation made on found Staff B working alone with one resident.

A review of Staff B's personnel record showed that she was hired in . There was no documentation of current and valid First Aid and [redacted] ( ) certification.

On at 3:25 PM, the Administrator acknowledged Staff B did not have the training.

Class III

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0085 - Training - Nutrition & Food Service - 58A-5.0191(7) FAC

Based on record review, and interview, the facility failed to have two hours continuing education in topics pertinent to nutrition and food service for three out of three (Staff A, B, and C) sampled staff.

Findings included:

On at 10:30 AM Staff B was observed cooking in the kitchen. Staff B prepared the meal for Resident #1. Review of personnel files found no documentation that Staff A, B, or C had received a minimum of two hours continuing education in topics pertinent to nutrition and food service training.

On at 3:30 PM the Administrator acknowledged Staff A did not have the updated training.

Class III

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

Based on record review and interview, the facility failed to ensure that one out of three sampled staff understood and received training regarding ( ) (Staff B).

Findings included:

A review of Staff B's personnel file found documentation of training on .

On at 10 :30 AM with Staff B revealed she could not give a description of what a order was. When asked if she had taking the training she stated, "I do not know what that is."

Class III

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

Based on observation, record review, and interview, the facility failed to have a menu posted conspicuously and accessible to residents.

Findings included:

On at 9:20 AM observation found no menu posted. On at 10:30 AM Staff B was

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observed cooking in the kitchen. Staff B prepared the meal for resident #1. Staff B and C were unable to find where the menus were kept.

On at 3:30 PM the Administrator acknowledged they did not have any menus.

Class III

0127 - Fiscal - Liability Insurance - 429.275 (3) FS; 58A-5.021(4); 624.605(1)

Based on record review and interview, the facility failed to maintain liability insurance coverage.

Findings included:

On at 9:00 AM the liability insurance posted was dated and had expired on .

On at 3:30 PM the Administrator stated, "I have it on my email."

Class III

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

Based on observation and interview, the facility failed to ensure all existing appurtenances were maintained in good working order.

Findings included:

On at 9:20 AM, observation showed bedroom #1 with a missing tile near toilet and the shower drain in bathroom #2 missing its cover.

On at 3:30 PM, Staff B acknowledged the tile was missing and the shower drain was missing it's cover.

Class III

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

Based on record review and interview, the facility failed to have an updated admission and discharge

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log.

Findings included:

Review review found six resident listed on the admission and discharge log. Resident #4, 5, and 6 were no longer at the facility and had no discharge dates were listed.

On [redacted] at 3:30 PM , the Administrator acknowledged she had not updated the admission and discharge log.

Class III

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

Based on record review and interview, the facility failed to ensure that a personnel record for one out of three (Staff B) sampled staff had an employment application with references.

Findings included:

Review of the the staff files revealed Staff B did not have a employment application with references on file.

On [redacted] at 3:28 PM the Administrator acknowledged Staff B did not have a job application.

Class III

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

Based on record review and interview, the facility failed to have an updated health assessment completed after a change in health condition, and failed to have recorded semi annually for one out of three (Resident #1) sampled residents.

Findings included:

On [redacted] at 9:15 AM, observed Resident #1's bed with a full bed rail. On [redacted] at 9:15 AM Staff B stated, "Resident #1 was under hospice care."

Review of hospice records revealed Resident #1 was admitted under hospice on [redacted]. Her Initial

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Plan of Care was completed on . Resident #1's last health assessment was dated . There was no documentation of an updated health assessment and progress notes to reflect Resident #1 was receiving hospice services at time of the survey. Review of Resident #1's and Resident #2's sheet documented monthly for 2017, however there were no recorded for 2018. The facility failed to ensure were recorded semi-annually for both residents who need assistance with activities of daily living.

On at 3:25 PM via telephone, the Administrator acknowledged Resident#1's health assessment had to be updated.

Class III

0181 - Emergency Plan Approval - 58A-5.026(2) FAC

Based on record review and interview, the facility failed to have the approved emergency management plan reviewed annually.

Findings included:

Record review found that the facility did not have a current emergency management plan submitted and/or approved annually. The last letter of approval was dated and expired on .

On at 3:30 PM the Administrator stated, "I have it on my email. "

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on record review and interview, the facility failed to be in compliance with the requirements of the detailed emergency environmental control plan.

Findings included:

Record review showed no documentation of written policies and procedures to ensure that the assisted living facility could effectively and immediately activate, operate and maintain the alternate power source and any fuel required for the operation of the alternate power source. Further review shoed no documentation that residents were notified of the implementation of the plan, and did not ensure the staff received the emergency plan training. The facility did not have a monoxide detector.

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On ..... at 3:20 PM the Administrator acknowledge she did not have a ..... monoxide detector, the policies, and had not notified the residents.

Class III