STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968502	01/07/2019
NAME OF PROVIDER OR SUPPLIER **SUNSHINE ELDERCARE OF MIAMI LAKES INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **6911 BAMBOO ST MIAMI LAKES, FL 33014**	

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

0000 - Initial Comments

A Complaint Survey (CCR#2018017324) was conducted on , and concluded , . Sunshine Eldercare of Miami Lakes with Limited Mental Health component had a deficiency identified at the time of the survey:

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

Based on record review and interview the facility failed to provide care and services appropriate to meet the needs of residents accepted for admission to the facility for one out of seven sampled residents (#1) who had precautions. Resident #1 sustained injuries from a at the facility. The facility also failed have written records regarding Resident#1's behavior or or contact her health care provider.

Findings included:

On at 9:30 AM the Administrator stated, "I had a resident that but she is no longer here. Resident # 1 rolled out of the bed and we called the rescue and they came and examined her and she was fine; just had the . About 2 weeks after she was feeling weak and stopped eating and was transferred to the hospital but in was not related to the ."

On at 10:51 AM Staff C stated, "Resident # 1 about 6 AM, I was alone with them. The other employee was coming at 7:00 AM. I was entering her room and she slipped out of the bed in front of me. She sitting."

Review of Resident # 1's record revealed the health assessment had the following diagnoses of , , , Imbalance, and , . Resident #1 had unsteady gait and required and universal precautions. Resident #1 required supervision with grooming and assistance with ambulation, , toileting and transferring.

On at 10:54 AM the Administrator stated, "Resident #1 was taking 2.5 mg and she was heavy. The rescue workers were the ones that lifted her up from the floor. If you put some pressure on her skin she would easily because of the . She was getting agitated and hard to take care of. She was fine during the day time and at night she would completely change."

On received the record from Miami Dade Fire Rescue and the only case they had at Sunshine Eldercare of Miami Lakes on at 9:17 AM and had no resident name because it was only to lift

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968502	01/07/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUNSHINE ELDERCARE OF MIAMI LAKES INC	**6911 BAMBOO ST MIAMI LAKES, FL 33014**

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

up a resident from the floor and place her in the wheelchair.

Review of Resident #1's record revealed there was no documentation that employees provided care or services to Resident #1 from 6:00 AM when the resident sustained the and was on the floor to 9:17 AM when the rescue response team arrived. Record review also revealed the facility did not have two staff members available to meet the needs of the residents at night.

Review of Resident #1's record revealed the facility did not have any documentation regarding the resident's behavior at night or regarding the condition of her skin. The facility failed to contact the doctor regarding Resident #1's behavior or skin condition. Resident #1 had a from the bed on the night of .

On at 10:35 AM Resident #1's daughter stated, "I do not know how many she had, she was all black and blue. One day I went to visit her and a resident and hit the . They just lift her up and put her in bed with a pack of ice and closed the bedroom door. The employee kept telling that resident to stand up on her own. It was a fat lady.. In the case of my mother, if she she would not be able to stand up. The day I took my mother out of there I was knocking on the door for ½ an hour and they would not open the door. When they finally opened they were cleaning my mother that was bloody. I called the rescue but they did not want to take my mother to the hospital where one of her doctors work so I called another transportation and took her to that hospital. I do not remember the date. My mother was all drugged out. She was on Klonazepam. She had on her , , , , , , but she did not have any ."

Review of Resident #1's record revealed that there was no documentation about contacting Resident #1's physician regarding the on or about the resident from her .

On received the medical records from hospital. Resident #1 was admitted to hospital on . The nursing assessment dated stated on the skin section " ."

On at 3:40 PM the Administrator stated, "She did not have any when she was living in the ALF. She was not receiving care because she did not have any . She was there for about 3 weeks."

Class III