

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966546	(X3) DATE SURVEY COMPLETED 02/01/2019
NAME OF PROVIDER OR SUPPLIER ST DB&Y HOME FOR THE ELDERLY,	STREET ADDRESS, CITY, STATE, ZIP CODE 8715 NW 153RD TERRACE HIALEAH, FL 33018	

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

0000 - Initial Comments

A complaint (CCR# 2018018382) survey was conducted on and concluded on St DB& Y Home for the Elderly had deficiencies at time of the survey:

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

Based on observation, record review, and interview the facility did not have written information regarding care for one of six (#1) sample residents. The facility also failed to have documentation for the home health nurse services for one of six (#1) sampled residents.

Findings included:

Record review revealed Resident #1's last health assessment was dated reflecting a Left Further review revealed that the facility did not have Resident #1's written information of the care.

Interview on at 4:59 pm the home health nurse stated Resident #1 had daily care, which was improving , and it had been taking longer to resolve due to location (left). The nurse stated that the started as, it was still, and it was not In addition, the Nurse stated that the facility did not have written information regarding improvement and measures due to electronic documentation.

Class III

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

Based on observation and interview the facility failed to maintain a safe and decent living environment for the residents.

Findings included:

Observation on at 12:00 pm showed a pin with latch on top of the bathroom door which prevent anyone from entering.

Interview on at 12:00 pm Staff F stated, "We do not use it regularly. It is to prevent the residents to go to the bathroom at nighttime alone, instead of calling us to assist them."

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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Class III 0077 - Staffing Standards - Administrators - 429.176 FS; 429.52(), 58A-5.019(1) FAC Based on record review and interview the facility failed to have proof of the manager's high school diploma or GED. Findings included: Record review on at 1:00 pm found the facility's manager (hired on) did not have evidence of having a high school diploma or its equivalent. Interview with Staff A on at 1:30 pm revealed that she did not know that the manager did not have her high school diploma in her personnel file. Interview on at 1:45 pm Staff A stated, "I will request her the high school diploma." Class III 0081 - Training - Staff In-Service - 58A-5.0191() FAC Based on record review and interview the facility failed to have an in-service training for two of eight sampled staff (G and H). Findings included: Record review revealed Staff G and H did not have safe food handling practices training within 30 days of employment. Interview on at 12:30 pm Staff A acknowledged that Staff G and H did not have safe food handling practices. Class III		

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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 maintain the employment status within the clearinghouse for three of seven (B, G and H) sampled staff.

Findings included:

Observation on _____ at 12:00 pm revealed Staff G working in the facility assisting residents. Interview on _____ at 12:00 pm Staff G stated, " I start to work on _____ (2018)."

Review of background screening employee roster database did not have Staff B, G, and H listed.

Interview on _____ at 12:30 pm Staff A stated she had to add Staff B, G and H in the facility's roster."

Record review revealed the staffing pattern found Staff G and H scheduled to work in the facility .

Staff B's application for employment reflected that she started to work on _____. Staff G's applications for employment reflected a hire date of _____ and Staff H was hired on _____.

Unclassified