STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964423	**01/31/2019**
NAME OF PROVIDER OR SUPPLIER **VILLA MARIA PIA**	STREET ADDRESS, CITY, STATE, ZIP CODE **322 NW 43 PLACE** **MIAMI, FL 33126**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on . . . . . Villa Maria Pia with Limited Nursing Services and Limited Mental Health components had deficiencies identified at the time of the survey.

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

Based on record review and interview the facility failed to provide evidence of conducting elopement drills twice a year.

Findings included:

Review of the elopement drill book revealed that the last one had been conducted on . . . .

On . . . at 10:55 AM the Administrator stated, "I have to do them."

Class III

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

Based on observation, record review, and interview the facility failed to follow the state guidelines when assisting residents with self administration of medications.

Findings included:

Review of the medication observation record revealed that the medications were scheduled at 8:00 AM.

On . . . . at 9:45 AM (over an hour after the scheduled time) observed the assistance with self administration of medications for Resident #2 by Staff C.

On at 9:45 AM Staff C stated, "Resident #2 likes to sleep late sometimes."

Class III

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

Based on record review and interview the facility failed to keep an accurate staffing schedule.

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Findings included:

Review of the staffing schedule revealed that Staff F was listed and Staff C was not listed. Review of the facility roster revealed that Staff F had an end-date of .

On at 9:40 AM the Administrator stated that she would fix the schedule.

Class III

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

Based on record review and interview the facility failed to provide a pre-service orientation of at least 2 hours to all new assisted living facility employees who have not previously completed core training for 2 out of 6 sampled staff (B and C).

Findings included:

Review of personnel records revealed Staff B was hired on and Staff C on did not have the 2 hours of pre-service orientation training.

On at 1:17 PM the Administrator stated, "I did not know. So both of them needed it."

Class III

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

Based on record review and interview the facility failed to provide evidence that one out of six sampled staff (D) received at least one hour of training in the facility's policy and procedures regarding ( ) within 30 days after employment.

Findings included:

Review of the personnel record for Staff D revealed she was hired on . There was no documentation of training available for review.

On at 2:45 PM the Administrator stated that she would look for the certificate.

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Class III

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

Based on observation and interview the facility failed to have canned meat in the emergency food supply based on weekly meals.

Findings included:

On during the tour approximately at 8:55 AM observed that there was no canned meat (chicken, beef, pork, turkey or fish) in the emergency food.

On at 10:32 AM the Administrator stated, "we had tuna but we used it. We are buying now in the beginning of the month.

Class III

0125 - Fiscal - Surety Bonds - 429.27(2) FS; 58A-5.021(3) FAC

Based on record review and interview the facility who acts as the payee for a resident (#8) failed to file a surety bond with the agency in an amount equal to twice the average monthly aggregate income or personal funds due to residents, or expendable for their account, which are received by a facility.

Findings included:

On at 10:15 AM the Administrator stated that Resident #8's check came under the facility's name and that the resident paid $750.00 every month. Review of Resident # 8's contract revealed she pays $750.00.

On at 10:45 AM the Administrator stated, "Is the surety bond something new?"

Class III

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

Based on observation, record review and interview the facility failed to provide an accurate health assessment for one out of nine sampled residents (# 9).

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Findings included:

Review of Resident # 9's record revealed the health assessment had been completed on and mentioned the following diagnoses: , Major , and . Resident #9 had been discharged from the hospital on with a diagnosis of , . The health assessment did not mention in the diagnoses that the resident was .

Review of Resident # 9's medications revealed she was taking , 10 mg twice a day, , 25 mg in the morning and 50 mg at bedtime; both medications are ; also takes , 0.5 mg twice a day ( ), , 15 mg at bedtime (,) and , 500 mg three times a day (stabilizer and medications).

On at 12:25 PM the Administrator stated that she will talk to the doctor.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, record review, and interview the facility failed to be in compliance with the emergency plan.

Findings included:

Review of facility finder revealed the facility had an extension until to install a fixed generator.

On at 10:35 AM the Administrator stated, "the fixed generator is not installed yet, I do not know why is taking a long time. The consultant told me that AHCA was not giving new extensions so we submitted a new plan of with a gasoline portable generator."

Review of the approval letter revealed it was dated .

On at 11:00 AM observed a portable generator in a shed in the patio. Observed a gasoline caddy with a capacity for 25 gallons in the patio but it was empty.

On at 11:10 AM the Administrator stated, "They are going to bring the gasoline now."

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On at 2:23 PM the Administrator stated that she placed the implementation letter in the bulletin board but did not informed each resident or representative individually in writing.

Review of the bulletin board that what was posted was the approval letter.

On at 2:26 PM she stated, "Then I did not do it."

Class III

L241 - LMH - Records - 429.075( ); 58A-5.029(2) FAC

Based on record review and interview the facility failed to have an annual community living support plan for 2 out 9 sampled residents (Residents #6 and #9).

Findings included:

1) On at 10:50 AM the Administrator stated Residents #6 and #9 had diagnoses and received .

Review of Resident #6's record revealed that the community living support plan were dated but not signed by a mental health provider and the resident.

On at 11:58 AM the Administrator stated, "Resident #6 is not being seen by any psychiatrist. The primary doctor is the one that orders his medications."

2) Review of Resident # 9's record revealed that there was no community living support plan and agreement in her record.

On at 12:20 PM the Administrator stated, "Her guardian took it to sign it last week."

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 a staff that is in direct contact with limited mental health resident get a minimum of 6 hours of specialized training in working with individuals with mental health diagnoses within 6 months of being hired for 1 out of 5 sampled employees (Staff B).

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Findings included:

Review of Staff B's record revealed that she was hired on [redacted] and the facility did not have limited mental health training available for review.

On [redacted] at 1:15 PM the Administrator stated, "I will make her the [redacted]."

Class III