STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968810	**02/07/2019**
NAME OF PROVIDER OR SUPPLIER **OPEN ARMS ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **13453 SW 289 TERR** **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 . Open Arms ALF, Inc with Limited Mental Health component had deficiencies identified at the time of the survey:

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

Based on observation, record review, and interview, the facility failed to have the record initiated on admission for one out of six (Resident #1) sampled residents. The facility failed to ensure that resident records include a copy of the written informed consent for unlicensed staff assisting the resident with the self-administration of medication for two out of six (Resident #1 and #2) sampled residents.

Findings Include:

Record review showed Resident #1 was admitted on . The facility did not have documentation of her at the time of admission.

Medication Observation Record review showed the facility assisted Resident #1 and #2 with their medications.

Resident #1 and Resident #2 did not have documentation of the written informed consent for unlicensed staff assisting the residents with self-administration of medications.

Interview conducted on at 2:35 PM, the Administrator stated she assisted Resident #1 and #2 with the self-administration of medications and confirmed that Resident #1 did not have her at the time of admission.

Class III

0167 - Resident Contracts - 58A-5.025 FAC; 429.24 FS

Based on record review and interview, the facility failed to have documentation of resident contract for two out of six (Resident #1 and #2) sampled residents.

Findings include:

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Record review showed Resident #1 admitted on and Resident #2 admitted on did not have executed contracts with the residents.

Interview conducted on at 2:35 PM, the Administrator acknowledged that the facility did not have contracts for Residents #1 and #2.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, record review, and interview, the facility failed to store 48 hours of emergency fuel on site. The facility also failed to notify each resident and the resident's legal representative of the existence of the emergency power equipment within 5 business days in writing. The facility did not have monoxide detectors installed.

Findings included:

On at 10:00 AM, observed a portable generator stored inside a shed. There was no fuel for the generator on site. The facility also did not have monoxide detectors installed.

A review of all resident records showed no written notice of the existence of the emergency power equipment.

Interview conducted on at 2:35 PM, the Administrator acknowledged that the facility needed to store the emergency fuel, provide the notice to all residents or their legal representative, and install the monoxide detectors.

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 the staff completed the minimum of three hours of continuing education in limited mental health for one out of three (Staff C) sampled staff.

Findings included:

Review of Staff C's file showed the last mental health continuing education was completed on .

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SUMMARY STATEMENT OF DEFICIENCIES
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Interview conducted on . . . . . at 2:35 PM, the Administrator stated Staff C did not receive 3 hours continuing education in limited mental health.

Class III