

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967495	(X3) DATE SURVEY COMPLETED 01/29/2019
NAME OF PROVIDER OR SUPPLIER HAPPY LIFE ALF	STREET ADDRESS, CITY, STATE, ZIP CODE 14785 COOLIDGE LANE HOMESTEAD, FL 33033	

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

0000 - Initial Comments

A Complaint (CCR#2018017938) Survey was conducted on and concluded on Happy Life Alf with Limited Mental Health component had the following deficiencies identified at the time of the survey:

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

Based on interview and record review, the Assisted Living Facility failed to contact the resident's health care provider and other appropriate party such as the resident's family, guardian, health care surrogate, or case manager if the resident exhibits a significant change for one out of eight sampled residents (#1).

Findings included:

On at 4:01 PM, Resident #1's son revealed that he found her when he arrived to the facility. The facility did not inform him.

Review of Resident #1's record showed that Resident #1's son was on the demographic sheet as the emergency contact. The last progress note on record was on It showed that the resident went to the hospital and there was no documentation that the facility contacted the listed emergency contact.

Class III

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

Based on observation and record review, the Assisted Living Facility failed to follow the right procedures during self-administration of medication in accordance with in accordance with procedures described in section 429.256, F.S. for one out of eight sampled residents (#5).

Findings included:

On at 8:33 AM, Resident #5 rested in bed with closed in # . There was a clear, plastic little cup at the top of an overbed table in # . It had three pills and one capsule. Pills were of colors pink, white and peach while the capsule was half green and half

On at 8:33 AM, Staff C revealed that medications at the top of the overbed table in # . belonged to Resident #5. She stated they were the resident's morning medications, but he had not

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woken up yet. Review of Resident #5's record showed that the health assessment completed on indicating the resident needed assistance with self-administration of medications. Review of Resident #5's record showed that the health assessment (AHCA form 1823) completed on indicating the resident needed assistance with self-administration of medications. Review of Resident #5's Medication Observation Records on at 8:47 AM revealed that the staff initialed morning doses of medications for Class III 0054 - Medication - Records - 58A-5.0185(5) FAC Based on record review and interview, the Assisted Living Facility failed to ensure the Medication Observation Records (MORs) included any known the resident may have for four out of eight sampled residents (#2, #3, #4 and #5). Facility failed to ensure that MORs included the name of the resident's health care provider and the health care provider's telephone number for two out of eight sampled residents (#2 and #4). Facility failed to ensure that MORs included the directions for use of each medication for three out of eight sampled residents (#2, #3 and #4). Facility failed to specify the period of charting on the MORs for one out of eight sampled residents (#3). Findings included: 1. Review of Residents #2, #3, #4 and #5's MORs showed that the section was blank. Review of Resident #2's record showed that the health assessment (AHCA form 1823) completed on indicating that the resident had to soap and tape (Nylon and paper). Review of Resident #3's record showed that the health assessment (AHCA form 1823) completed on indicating that the resident did not have known Review of Resident #4's record showed that the health assessment (AHCA form 1823) completed on indicating that the resident did not have known Review of Resident #5's record showed that the health assessment (AHCA form 1823) completed		

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indicating that the resident had to 2. Review of Residents #2 and #4's MORs showed that the sections for name of the physician and the physician's phone number were blank. 3. Review of Residents #2, #3, and #4's MORs showed included the name of the medications, the doses of the medications and their scheduled time. MORs did not include the directions of use of medications. 4. Review of Resident #3's MORs showed that the month section was blank and the year section showed 2018. On at 1:18 PM, Staff D revealed that he would ensure that pharmacy corrected the residents' MORs. Class III 0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC Based on observation and record review, the Assisted Living Facility failed to keep medications secured at all times. Findings included: On at 8:33 AM, Resident #5 rested on bed with closed in # where there was a clear, plastic little cup at the top of an over bed table. It had three pills and one capsule. Pills were of colors pink, white and peach and a capsule half-green and half- On at 8:33 AM, Staff C revealed that medications at the top of an over bed table in # belonged to Resident #6. They were his morning medications but he has not woken up yet. Review of Resident #5's health assessment (AHCA form 1823) showed completion date was on and the resident needed assistance with self-administration medications. On at 8:34 AM, Resident #2 lay on bed and Resident #4 sat on his bed in # There was a bottle of 220 mg at the of the night tablet between Residents #2 and #4's beds. Review of Resident #2's health assessment (AHCA form 1823) showed completion date was on		

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and the resident needed assistance with self-administration medications. Class III 0079 - Staffing Standards - Levels - 58A-5.019(3) FAC Based on observation and record review, the Assisted Living Facility failed to maintain the minimum staff per week of 212 hours for a census of six residents. Findings included: On at 8:23 AM, Staff C revealed that there were six residents in the facility and she was taking care of them, there was no other staff in the building at that moment. Observed that Staff C was the only staff in the facility. On at 9:04 AM, Staff D arrived. Review of Staff Schedule for the week from to showed that Staff C worked from Monday to Friday from 7 AM to 6 PM. Staff D worked from Monday to Friday from 3 PM to 10 PM while on Saturday and Sunday worked from 6 PM to 6 AM. Staff B worked from Monday to Friday from 5 PM to 8 AM while on Sunday worked from 6 AM to 9 PM on Saturday from 8 AM to 9 PM. It was a total of 203 hours per week. Class III 0083 - Training - First Aid and - 58A-5.0191(5) FAC Based on interview, observation and record review, the Assisted Living Facility failed to ensure that a staff member who had completed courses in First Aid and () and held a currently valid card documenting completion of such courses was in the facility at all times. Findings included: On at 8:23 AM, Staff C revealed that there were six residents in the facility and she was taking care of them, there was no other staff in the building at that moment. Observed that Staff C was the only staff in the facility. On at 9:04 AM, Staff D arrived.		

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Review of Staff Schedule for the week from to showed that Staff C worked from Monday to Friday from 7 AM to 6 PM. Staff D worked from Monday to Friday from 3 PM to 10 PM while on Saturday and Sunday worked from 6 PM to 6 AM. Staff B worked from Monday to Friday from 5 PM to 8 AM while on Sunday worked from 6 AM to 9 PM on Saturday from 8 AM to 9 PM. Review of Staff C's personnel file showed that hire date was on There was no evidence of completion of First Aid and training. On at 11:50 AM, Staff D revealed that two out of six residents living in the facility at the time of the survey had a , the rest of residents wanted to be Staff C was missing the First Aid and training. Class III 0160 - Records - Facility - 58A-5.024(1) FAC Based on interview, observation and record review, the Assisted Living Facility failed to have an up-to-date admission and discharge log listing the names of all residents. Findings included: On at 8:23 AM, Staff C revealed that there were six residents in the facility . On at 8:33 AM, Resident #5 rested in bed with closed in # .. Review of the admission and discharge log showed that it did not include Resident #5. On at 10:25 AM, Staff D revealed that he could swear that he included Resident #5 in the admission and discharge log. Class III 0162 - Records - Resident - 58A-5.024(3) FAC Based on record review and interview, the Assisted Living Facility failed to have complete and accurate health assessment for three out of eight sampled residents (#3, #4 and #5).		

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Findings included: Review of Resident #4's health assessment (AHCA form 1823) showed completion date was on _____ and the _____ and _____ sections were blank. Review of Resident #5's health assessment (AHCA form 1823) showed completion date was on _____ and the resident require 24-hour nursing or _____ care. On _____ at 10:07 AM, Staff D revealed that Resident #5 was disable. He believed that the resident was disable due to mental issues. The resident went to a program three times a week but it was thru the court. Further interview at 10:19 AM, he added that the resident did not receive 24 hours nursing or _____ care. The resident went to the program where they provided what he needed. Review of Resident #3's record showed that admission date was on _____. The health assessment (AHCA form 1823) showed completion date was on _____ and the resident needed medication administration. On _____ at 9:47 AM, Staff D revealed that he did not have a health assessment at the time of the admission for Resident #3. On further interview at 10:17 AM, he revealed that the resident received assistance with self-administration of medication. Class III		