STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968775	**02/27/2019**
NAME OF PROVIDER OR SUPPLIER **LA VIDA EN EL MAR ALF INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **6802 ROSEWOOD CT** **TAMPA, FL 33615**	

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

0000 - Initial Comments

On [redacted], a biennial survey with limited mental health services was conducted in conjunction with a revisit to Complaint (CCR#2018001340) at La Vida En El Mar Assisted Living Facility. The facility had deficiencies at the time of the visit.

License #12627

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on observations, interview and record review, the facility failed to ensure one of six sampled residents (Resident #1) was appropriate for continued residency at the facility.

Findings included:

A record review of Resident#1's record revealed resident#1 is a [redacted] female that was initially admitted to the facility on . A review of Resident#1's health assessment dated revealed a medical history of [redacted] and [redacted]. Resident#1 had physical sensory limitations of and difficulty ambulating. Resident #1 required assistance with all activities of daily living including ambulation, bathing, [redacted], transferring, grooming and toileting.

On at 9:45 a.m. during a tour of the facility, Resident #1 was observed in the common area of the facility seated at a dining table. Resident#1 was observed physically tied with a thick tan buckle positioned around the lower part of her waist and fastened directly behind her with a metal closure. Resident#1 was seated at a dining table alone.

During an interview with Staff C on 2.27/2019 at 9:47a.m., Staff C stated, "yes she is tied down at her waist anywhere from two to three hours a day because she will down or make attempts to leave the facility if we take it off of her." Staff C confirmed Resident#1 is tied down while staff is busy with other

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things and can't watch her. Staff C could not confirm if a recent health assessment by a health care providerwas done to confirm if Resident#1's needs can be met in an Assisted Living Facility.

During a interview with Staff A on at 10: 15 a.m. Staff A confirmed Resident# need a hire level of care. Staff A stated, " I told them not to tie her down, but we still do it, I don't like it. The reason (Resident#1) is tied down is so she will not lay on the floor and roll around or try to leave the facility."

Class III

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

Based on observations, interview and record review, the facility failed to ensure that one of six sampled residents (Resident #1) was free from physical . The facility strapped Resident #1 to a chair daily.

Findings included.

A record review of Resident #1's record revealed Resident #1 is an female that was initially admitted to the facility on . A review of Resident #1's health assessment dated revealed a medical history of and . Resident #1 had physical sensory limitations of and difficulty ambulating and required assistance with all activities of daily living including ambulation, bathing, , transferring, grooming and toileting.

On at 9:43 a.m., during a tour of the facility Resident #1 was observed in the common area of the facility seated at a dining table alone. Resident #1 was observed physically tied with a thick tan buckle positioned around her lower part of her waist and fastened directly behind her with a metal closure.

Staff C was immediately asked to identity who Resident #1 was and why she was physically restrained and wasn't able to get up. Staff C stated, "Yes, she is tied down at her waist anywhere from two to three hours a day because she will down or make attempts to leave the facility if we take it off of her." Staff C stated, "Yes, her family wants her to be tied down so we tied her down." Staff C confirmed Resident#1 is tied down while staff are busy and can't watch her.

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On at 9:55 a.m., Resident #1 was observed making several attempts to get up from the chair she was seated in. Resident #1 made loud groaning noises as she tried to force the buckles off, but wasn't able to free herself. Resident #1 was able to lift the chair in the air from the floor trying to release herself from the . Resident #1 continued to kick her up and down and make forceful gestures to get up from the chair, but wasn't able to.

Resident #1 was observed physically restrained in her chair from 9:43 a.m. until 10:20 a.m. Staff removed the from Resident #1 after they observed Agency staff attempting to take a photo.

During an interview conducted with Resident #1's daughter on at 10:59 a.m., Resident#1's daughter confirmed she gave the facility permission to start using a belt buckle to physically tie Resident #1 down when staff are busy. Resident #1's daughter stated that staff usually keeps her tied down for a couple hours per day as needed.

On at 2:15 P.M. Staff B was asked to assist in checking Resident #1 for of the skin after removal of the . Resident #1 was observed with a light pink marking where the buckle had been tightly positioned against her lower abdomenal area.

Class II

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review and interview, the facility failed to provide evidence of freedowm from ( ) documented on an annual basis for three (The Administrator, Staff A and Staff B) of three employees selected for record review.

Findings included:

A review of employee records conducted on showed that the administrator, Staff A and B had no evidence of a negative examination in their personal files.

During interview with Staff C, on at 12:15 p.m., he confirmed that the administrator, Staff A, and Staff B did not have a examination on file at this time. Staff C stated, " I had everything in the files at one point, but they moved everything."
Staff C confirmed the administrator, Staff A and B are currently on the staffing schedule and actively provided care and services to residents.

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Class III

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c); 59A-35.090(2)(d)-(3)

Based on interview and record review, the facility failed to ensure that 3 out of 3 sampled employees (Administrator, Staff A and B) had a signed compliance attestation form for background screening in their employee file.

Findings included:

On a record review was conducted of the administrator. The administrator did not have a signed compliance attestation form in his employee file.

On a record review was conducted of the employee file for Staff A. Staff A did not have a signed compliance attestation form in her employee file.

On a record review was conducted of the employee file for Staff B. Staff B did not have a signed compliance attestation form in her employee file.

On at 12:38 PM an interview was conducted with Staff C. Staff C reviewed the employee files and confirmed findings. Staff C, stated " I do not have them, I did have them but someone removed them from their files."

Unclassified