STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967157	R 03/01/2019
NAME OF PROVIDER OR SUPPLIER **BMA ASSISTED LIVING CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **12381 SW 144 TERRACE** **MIAMI, FL 33186**	

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

0000 - Initial Comments

A Standard Biennial Revisit Survey was conducted on 03/01/2019. BMA Assisted Living Corp with a limited mental health component had the following deficiencies identified at the time of the survey:

0077 - Staffing Standards - Administrators - 429.176 FS; 429.52( ),58A-5.019(1) FAC

Based on record review and interview, the facility failed to ensure the administrator completed the CORE assisted living facility administrator competency test requirements no later than 90 days after becoming employed as the administrator.

Findings included:

A review of the Administrator's personnel file showed that there was no documentation of the core competency test completion. The Administrator was hired on .

On at 11:20 AM, the Administrator stated she would take the CORE test soon.

Class III

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interview, the facility failed to ensure all residents had the required furnishes in their rooms for two out of five (Resident #2 and #7) sampled residents.

Findings Included:

Observation on at 10:35 AM showed that Resident #7's room did not have a dresser, closet or wardrobe space, or a bed side lamp or floor lamp. Resident #2's room did not have a bed side lamp or floor lamp.

On at 12:30 PM, Administrator stated that Resident #2 and #7 did not ask for a bed side lamp and a dresser.

Uncorrected
Class III

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SUMMARY STATEMENT OF DEFICIENCIES
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0162 - Records - Resident - 58A-5.024(3) FAC

Based on observation, record review, and interview, the facility failed to have an accurate health assessment for one out of seven (Resident #4) sampled residents. The facility failed to have documentation of the of a health care surrogate, health care proxy, guardian, or the existence of a power of attorney for one out of seven (Resident #1) sampled residents. The facility failed to have the record initiated on admission and did not include a copy of the written informed consent for unlicensed staff assisting the resident with the self-administration for one out of seven (Resident #7) facility residents.

Findings Include:

Observation on at 11:50 PM showed Resident #4 was able to transfer with staff assistance.

A review of Resident #4's health assessment dated showed the resident needed total assistance with bathing, grooming, toileting, and transferring.

Review of Resident's #1 record showed her granddaughter signed her contract on and there was no documentation of the of a health care surrogate, health care proxy, guardian, or the existence of a power of attorney in her record.

Review of Resident's #7 record (admitted on) showed no documentation of his at the time of admission or of the written informed consent for unlicensed staff assisting the resident with self-administration of medications.

Medication Observation Record review showed the facility assisted Resident #7 with his medications.

On at 12:15 PM, the Administrator stated that she assisted Resident #7 with the self-administration of medications and confirmed that Resident #7 did not have his at the time of admission. She confirmed that there was no power of attorney for Resident's #1.

Uncorrected
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 a resident contract for

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SUMMARY STATEMENT OF DEFICIENCIES
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one out of seven (Resident #7) sampled residents.

Findings include:

Record review showed that for Resident #7 admitted on . . . . . there was no documentation of the contract with the resident.

Interview conducted on . . . . . at 12:15 PM, Administrator acknowledged that the facility did not have documentation of Resident #7's contract.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation and interview, the facility failed to store the power source and the fuel at least 10 . from the facility.

Finding included:

Observation on . at 10:50 AM showed the facility stored the generator and twenty gallons of gasoline in the garage.

Interview conducted on . . . . . at 11:30 AM, Administrator stated that she was informed that the generator and the gasoline could be stored in the facility's garage.

Uncorrected
Class III