STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966967	**03/28/2019**
NAME OF PROVIDER OR SUPPLIER **NATALIA ALF INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2118 SW151 PLACE** **MIAMI, FL 33185**	

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

0000 - Initial Comments

A re-licensure survey was conducted at Natalia Alf Inc. on . . . ., ... Deficiencies were 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 conduct elopement drills twice a year.

Findings included:

Review of the elopement drills revealed that the last was conducted on .

On at 10:00 AM the Administrator stated, "I think my husband got and took them."

Class III

0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC

Based on observation and interview the facility failed to keep the medications locked at all times.

Findings included:

During the facility tour on . . . . . at 9:20 AM observed Resident #4's bottle of . . . . , a container of Rub and a bottle of Dry , Relief on top of the night stand in # .

On . . . . . at 9:20 AM Resident #4 stated, "My brother brought them and I want them here. They are mine."

On at 9:21 AM observed Resident # 5's bottle of re-usable Relieve Pack, a bottle of . . . and a bottle of Rubbing . . . on top of the night stand.

On . . . . . at 9:22 AM Staff C stated, "Resident #5's niece brought them." At 9:23 AM Staff B stated, "You do not know how many times we have told them about the medication but they just keep doing the same."

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Class III

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

Based on record review and interview the facility failed to have an updated health assessment for one out of six sampled residents (#2) who was admitted to hospice and had changes in activities of daily living.

Findings included:

Review of Resident # 2's record revealed she had been receiving hospice services since . Hospice's care plan reviewed on revealed she was dependent for 6 out 6 activities of daily living and required medication administration. The last health assessment was completed on and at the time she was not under hospice and she required supervision for walking and transferring, assistance with bathing, eating and toileting and was total for and grooming and required assistance with self administration of medications.

On at 11:05 AM Staff C stated, "Resident #2 is total. She cannot stand up or walk."

On at 11:07 AM the Administrator stated, "You are right. We did not do a new one because when Resident #2 started hospice she was still able to walk a little but now she is total. The medications are being administered by hospice."

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on record review and interview the facility failed to develop policies and procedures to ensure that the assisted living facility can effectively and immediately activate, operate and maintain the alternate power source and any fuel required for the operation of the alternate power source.

Findings included:

Review of the emergency power plan revealed that there were no policies and procedures available for review..

On at 1:50 PM the Administrator stated, "I did not know about the policies and procedures."

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Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on record review and interview the facility failed to report employee change in status within 10 business for one out of five sampled staff (E).

Findings included:

Review of the staffing schedule revealed that Staff A, B, C and D were listed for the month of .

Review of the facility roster revealed Staff A, B, C, D and E were listed as actively working.

On at 1:35 PM the Administrator stated, "Staff E does not work with us because she got sick. I do not remember how long ago. I cannot believe she stills in the roster."

Unclassified