STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965742	04/15/2019
NAME OF PROVIDER OR SUPPLIER **CARING FOR YOU I ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **5210 SW 5 TERRACE** **MIAMI, FL 33134**	

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

0000 - Initial Comments

A biennial re-licensure survey in conjunction with a complaint investigation was conducted at Caring For You I Alf, Inc on . Deficiencies were identified at the time of the investigation.

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

Based on observation, record review and interview, the Assisted Living Facility failed to ensure that physical in use left a way of escape without staff assistance for one out of six sampled residents (#2).

Findings included:

On at 7:46 AM, Resident #2 rested in bed. Her bed was against the wall, had and boards and a half bed rail up. The bed rail was in the middle of the bed. The resident was unable to exit the bed without staff removing the rail.

Review of Resident #2's record showed that there was a resident consent to the use of half-bed rails signed on by the resident's daughter. Also, there was a doctor's order for the use of half-bed rails dated .

On at 1:55 PM, the Administrator revealed that he did not think that the resident could remove the bed rail. He stated he would be sure to put the bed rail at the top (so that the resident could exit at the bottom). He did not think that it was a problem because it was a half bed rail, and there was the required documentation.

Class III

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

Based on observation and interview, the facility failed to provide privacy for two out of six sampled residents that used portable bedside commodes (Residents # 3 and # 4).

Findings Included:

On at 7:45 AM, observed Resident #3 and # 4 bedroom with portable bedside commodes side

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by side and the Residents had no right to privacy. Staff B said the Residents were both men.

On at 1:57 PM, the Administrator stated he did not know this was an issue because both Residents were men.

Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on record review, and interview the facility failed to provide evidence of personnel records containing a copy of the employment application, with references for one out of four sampled staff (Staff D).

Findings included:

Review of Staff D's personnel file showed no documentation of the employment application with references. Staff D was hired on .

On at 1:57 PM, the Administrator stated he thought the application was completed and in the file.

Class III

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

Based on record review and interview, the Assisted Living 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 six sampled residents (#2). The facility failed to have completed demographic data for four out of six sampled residents (#1, #2, #3 and #6).

Findings included:

Review of Resident #2's record showed that there was a resident consent to the use of half-bed rails signed on by the resident's daughter. Also, there was a doctor's order for the use of half-bed rail on .

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SUMMARY STATEMENT OF DEFICIENCIES
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On at 10:41 AM, the administrator revealed that the facility did not have any evidence that Resident #2 appointed her daughter as the Power of Attorney.

Review of Residents #1, #2, #3 and #6's records revealed that they missed the name, the address, and the telephone number of the health care provider.

On at 1:58 PM, the Administrator revealed that he would update the residents' demographic data.

Class III