STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968136	**05/09/2019**
NAME OF PROVIDER OR SUPPLIER **LOVE OF HOPE ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2911 NW 174TH STREET** **MIAMI GARDENS, FL 33056**	

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

0000 - Initial Comments

A re-licensure survey was conducted at Love of Hope ALF, Inc. on . . . . . . Deficiencies were 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 be under the supervision of a qualified administrator who was responsible for the operation and maintenance of the facility, and for the provision of appropriate care to all residents. The administrator of record, having failed to maintain certification requirements, was no longer eligible.

Findings included:

On . . . . . at 9:10 am, observed the administrator of record arrive at the facility. She stayed onsite until the exit conference at 1:30 pm, acting as administrator.

Review of the Administrator of record's personnel file revealed no documentation of valid and current core training and certification. that the last 12 hours of continuing education had been completed on and . There was no documentation that the administrator had retaken the core training and certification examination.

Class III

0080 - Training - Core & Competency Test - 429.52( ) FS; 58A-5.0191(1) FAC

Based on record review and interview the administrator failed to participate in 12 hours of continuing education in topics related to assisted living every two years, and failed to provide verification that the administrator had retaken the core training and certification examination.

Findings included:

Review of the Administrator's personnel record revealed that the last 12 hours of continuing education had been completed on . . . . . and . . . . . . There was no documentation that the administrator had retaken the core training and certification examination.

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On . . . . . at 11:09 AM the Administrator stated regarding the continuing education hours, "My consultant told me I did not need them yet."

Class III

0081 - Training - Staff In-Service - 58A-5.0191( ) FAC

Based on record review and interview the facility failed to provide a pre-service orientation of at least 2 hours to one out of three sampled staff (Staff C) before the staff provided personal care to residents.

Findings included:

On . . at 8:40 AM, observed Staff C on duty, caring for the census of four residents.

Review of personnel records revealed that Staff C had been hired on . . There was no documentation that Staff C had completed two hours of pre-service orientation training.

On . . . . . at 12:19 PM the Administrator stated, "I just heard about it yesterday."

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(7) FAC

Based on record review and interview the facility failed to ensure that a person designated by the administrator as responsible for the facility's food service and the day-to-day supervision of food service obtain, annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility for one out of three staff (Staff C).

Findings included:

Review of the personnel records revealed that Staff C had a certificate for two hours of nutrition and food services and a one hour of safe food handling dated . . . . . The certificate did not have the nutritionist's seal or the red signature which the trainer identified as being needed to confirm validity .

On . . at 12:05 PM Staff C stated, "Staff A cooks. I serve the food. I did the training at school with the lady." She was not able to provide the name of the "teacher."

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On at 12:18 PM Administrator stated, "Yes Staff C cooks. I have the certificate there. Did not know that you are not accepting them."

Class III

0125 - Fiscal - Surety Bonds - 429.27(2) FS; 58A-5.021(3) FAC

Based on record review and interview the facility failed to maintain a surety bond in an amount equal to twice the average monthly aggregate income or personal funds due to residents.

Findings included:

On at 1:17 PM the Administrator stated that she was the payee for Resident # 4. She stated that she did not have a surety bond but that she would get one.

Review of Resident # 4's record revealed that she paid $1200.00 every month.

Class III

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

Based on record review and interview the facility failed to have a copy of the employment application, with references furnished in the staff record for three out of three sampled staff (A, B and C).

Findings included:

Review of staff records revealed that the applications of Staff A, B and C did not have references furnished.

On at 11:07 AM the Administrator stated, "I never knew I needed to have references." At 11:08 AM she stated, "Staff C just migrated here. She knows no one. She is my sister."

Class III

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

Based on observation, record review and interview the facility failed to honor the resident rights in regards to the use of side rails for one out of four sampled residents (Resident # 1).

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Findings included:

During tour of the facility on . . . . . at 8:45 AM observed in . . . . # _ Resident # 1 laying in bed with half bed rails up.

Review of Resident #1's record revealed a prescription for half bed rail written on . No consent for half bed rail was found.

On . . . . . at 9:30 AM the Administrator stated, "to tell you the truth they did not sign it."

On . . . . . at 11:26 AM Resident #1's daughter signed the consent for half side rails.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, record review and interview the facility failed to be in compliance with the emergency power plan.

Findings included:

During tour of the facility on . . . . . between 8:40 AM and 8:50 AM observed that there was no . . . . monoxide detector installed.

On . at 10:33 AM the Administrator stated, "I do not have it. He is going to get it for me now."

On . . . . . at 11:15 AM observed Staff B installing the monoxide detector in the dining/family room.

On . . . . . at 9:17 AM observed that the generator box label stated that the generator runs 13 hours with the tank full; the tank had a capacity for 8 gallons. Observed there was only a container with 5 gallons of gasoline in the shed in the backyard.

On . . . . . at 9:23 AM the Administrator told Staff B, "Go buy more gasoline." Staff B brought 2 more containers of 5 gallons each at 10:15 AM for a total of 15 gallons, still less that the approximate 30 gallons needed to operate the generator for 48 hours.

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Review of the facility's records revealed that there no policies and procedures and no proof of written notification to the residents or their representatives.

On at at 10:27 AM the Administrator stated, "I do not have the policies and procedures yet." At 10:39 AM the Administrator stated, "I did not know that I had to notify in writing."

Class III

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Z813 - Results of Screening & Notification In File - 59A-35.090(3)(c), FAC

Based on record review and interview the facility failed to maintain onsite documentation of an eligible level II background screening result for one out of three sampled staff (Staff C).

Findings included:

A review of Staff C's personnel record of revealed that the level II background result stated "awaiting privacy policy."

Review of the clearinghouse database revealed that the level II background screening had been completed on and was eligible.

On at 11:58 AM the Administrator stated, "I will print it for her."

Class III