STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966999	**05/28/2019**
NAME OF PROVIDER OR SUPPLIER **VICKY'S HOME ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **6402 SW 41 STREET** **MIAMI, FL 33155**	

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

0000 - Initial Comments

A re-licensure survey was conducted at Vicky's Home ALF on . . . . . The facility had deficiencies at the time of the survey:

0004 - Licensure - Requirements - 58A-5.016 FAC

Based on record review and interview, the facility failed to provide documentation of a current annual sanitation inspection.

Findings included:

A review of the facility's inspection records on . . revealed that its annual sanitation report was dated , and expired on .

In an interview on at 3:54 PM, the Administrator said "I know. I called them they said they will come within 45 days."

Class III

0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC

Based on record review and interview, the facility failed to maintain a written record for two out of 11 sampled residents (Resident #1 and #2) who had significant changes and were hospitalized. The facility also failed to ensure the facility contact family members and the health care provider.

Findings included:

Arrived at the facility on at 8:03 AM and Staff B stated "7 residents here 2 hospital."

A review of the residents's files on showed progress notes for Resident #1 dated "resident was transferred to the hospital ... with . . . ." There was no notes on whether or the resident's family member or legal guardian was contacted. Resident #2 last progress notes dated . . . . . was not legible. There was no notes regarding Resident #2's hospitalization and whether or not the family member or legal guardian was contacted.

In an interview on at 10:42 AM, the Administrator stated "Resident #2 went to the hospital from

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the program. The doctor send her to the hospital because she had a bad . She goes to the program every day and sees the doctor every day there." The Administrator added "The consultant wrote the notes. No, the consultant did not see her. Resident #2 went to the hospital this Monday . The family member works there at the program." The Administrator stated "I called the family member."

Class III

0031 - Resident Care - Third Party Services - 58A-5.0182(7) FAC 429.255(1)(b). FS

Based on record review and interview, the facility failed to ensure that a third party provider who provided home health services left documentation for services provided to two out of 11 sampled residents (Resident #3 and #4).

Findings included:

A review of the Resident #3's home health record on revealed that the last three dates of administration were: 10 units, 10 units, and 10 units. Administration for was not on the log.

Resident #4's home health record showed last three dates of administration were: , and . administration for was not on the log.

In an interview on at 3:53 PM, the Administrator stated "okay."

Class III

0054 - Medication - Records - 58A-5.0185(5) FAC

Based on record review and interview, the facility failed to maintain an up to date daily medication observation record (MOR) for one out of 11 sampled residents who received assistance with self-administration of medications (Resident #10).

Findings included:

A review of the facility's MOR on showed that the route for , 300 mg Cap, take 2 caps 3 times daily was not written on Resident #10 's MOR. In addition, 8 PM dosage for and were not signed off for. There were no notes in the of the MOR. , 400 mg take 1 tablet by three time a day was not signed off for 2 PM and 8 PM dosage on and for 8

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PM on , there was no documentation on the of the MOR.

In an interview on at 3:53 PM, the Administrator went through the MOR and say "okay."

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 have a surety bond with the minimum bond proceeds that equal twice the value of the residents' monthly aggregate income for one out of 11 sampled residents (Resident # 7).

Findings included:

On at 10:20 AM, the Administrator stated "the facility is the payee for Resident #7 only."

Review of the facility records showed no documentation for a surety bonds. Review of Resident #7 Social Security Income showed a payment of $771.00 monthly.

In an interview on at 3:53 PM, the Administrator said "I know I need to have surety bonds."

Class III

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

Based on record review and interview, the facility failed to have a completed demographic data sheet for one out of 11 sampled residents (Resident #3).

Findings included:

A review of Residents' file on showed that the facility did not have an emergency contact phone number on Resident #3's demographic data sheet.

In an interview on at 3:53 PM, the Administrator stated "okay."

Class III

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0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, record review, and interview, the facility failed to have monoxide detector installed.

Findings included:

During a tour of the facility on found the facility did not have a monoxide detector.

Review of the facility's emergency Power Plan on stated " Monoxide alarm is located outside the facility. The batteries will be checked and system will be maintained every 6 months."

In an interview on at 9:49 AM, the Administrator pointing at the smoke detector stated "these are both monoxide detector and smoke detector." Picture taken monoxide detector was not written on the equipment. The Administrator was not able to provide the equipment book.

Class III

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Z809 - Proof of Financial Ability to Operate - 59A-35.062(3)(e)&(7);408.803(7) &.810(8)

Based on record review and interview, the facility failed to demonstrate financial stability. The facility failed to ensure that the residents' trust fund bank account had a monthly positive balance and was not delinquent with overdraft charges.

Findings included:

Based on the residents' fund account statements dated . . . . . -. . . . . , the facility was the payee for two residents. Two Social Security Income (SSI) payments of $771.00 each were deposited on . . . . . and the beginning balance was a negative -$14.45. On . . . . . the ending balance was -$8.45.

Statement dated . . . - . . . had a negative beginning balance of -$14.45 and an ending balance of -14/45; There were three SSI payments on . . . . . for $771.00, $771.00, ad $245.00.

Statement dated . . . . . - . . . . showed a negative beginning balance of -$6.45 and an ending -$14.45; There were three SSI payments on . . . for $771.00, $771.00, ad $245.00.

In an interview on . . . at 3:53 PM, the Administrator said "I try all the time to have it positive with enough money."

Unclassified

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

Based on observation and and interview, the facility failed to provide documentation showing that one out of five sampled staff (Staff C) had a signed copy of the attestation of compliance with background screening requirements in file prior to providing care to the participants.

Findings included:

Arrived at the facility on . . . . . on 08:03 AM observed Staff C in the facility with a census of 11 residents.

A review of the facility's personnel files on . . . showed that the facility did not have did not have a signed attestation of compliance with background screening in file for Staff C.

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In an interview on [redacted] at 3:53 PM, the Administrator said "okay."

Class III