Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11967035	A. BUILDING: _____ B. WING _____	07/10/2019

NAME OF PROVIDER OR SUPPLIER		STREET ADDRESS, CITY, STATE, ZIP CODE
SWEET	ALF, INC	15942 SW 61 LANE MIAMI, FL 33193

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments Complaint investigation (number 2019006661) was conducted at Sweet . . . ALF, Inc. Deficiencies were identified at the time of survey.	A 000		
A 077 SS=D	429.176 FS; 429.52( ),58A-5.019(1) FAC Staffing Standards - Administrators 429.176 Notice of change of administrator.-If, during the period for which a license is issued, the owner changes administrators, the owner must notify the agency of the change within 10 days and provide documentation within 90 days that the new administrator has completed the applicable core educational requirements under s. 429.52. A facility may not be operated for more than 120 consecutive days without an administrator who has completed the core educational requirements. 429.52( ), FS (4) A new facility administrator must complete the required training and education, including the competency test, within 90 days after date of employment as an administrator. Failure to do so is a violation of this part and subjects the violator to an administrative fine as prescribed in s. 429.19. (5) Administrators are required to participate in continuing education for a minimum of 12 contact hours every 2 years. 58A-5.019 Staffing Standards. (1) ADMINISTRATORS. Every facility must be under the supervision of an administrator who is responsible for the operation and maintenance of the facility including the management of all staff and the provision of appropriate care to all	A 077		

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A 077	Continued From page 1 residents as required by Part II, Chapter 408, F.S., Part I, Chapter 429, F.S., Rule Chapter 59A-35, F.A.C., and this rule chapter. (a) An administrator must: 1. Be at least [illegible]; 2. If employed on or after [illegible], have, at a minimum, a high school diploma or G.E.D.; 3. Be in compliance with Level 2 background screening requirements pursuant to Sections 408.809 and 429.174, F.S.; and 4. Complete the core training and core competency test requirements pursuant to Rule 58A-5.0191, F.A.C., no later than 90 days after becoming employed as a facility administrator. Individuals who have successfully completed these requirements before [illegible], are not required to take either the 40 hour core training or test unless specified elsewhere in this rule. Administrators who attended core training prior to [illegible], are not required to take the competency test unless specified elsewhere in this rule. 5. Satisfy the continuing education requirements pursuant to Rule 58A-5.0191, F.A.C. Administrators who are not in compliance with these requirements must retake the core training and core competency test requirements in effect on the date the non-compliance is discovered by the agency or the department. (b) In the event of extenuating circumstances, such as the [illegible] of a facility administrator, the agency may permit an individual who otherwise has not satisfied the training requirements of subparagraphs (1)(a)4. of this rule to temporarily serve as the facility administrator for a period not to exceed 90 days. During the 90 day period, the individual temporarily serving as facility administrator must:	A 077		

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A 077	Continued From page 2 1. Complete the core training and core competency test requirements pursuant to Rule 58A-5.0191, F.A.C.; and 2. Complete all additional training requirements if the facility maintains licensure as an extended congregate care or limited mental health facility. (c) Administrators may supervise a maximum of either three assisted living facilities or a group of facilities on a single campus providing housing and health care Administrators who supervise more than one facility must appoint in writing a separate manager for each facility. However, an administrator supervising a maximum of three assisted living facilities, each licensed for 16 or fewer beds and all within a 15 mile [illegible] of each other, is only required to appoint two managers to assist in the operation and maintenance of those facilities. (d) An individual serving as a manager must satisfy the same qualifications, background screening, core training and competency test requirements, and continuing education requirements of an administrator pursuant to paragraph (1)(a) of this rule. Managers who attended the core training program prior to [illegible], are not required to take the competency test unless specified elsewhere in this rule. In addition, a manager may not serve as a manager of more than a single facility, except as provided in paragraph (1)(c) of this rule, and may not [illegible], serve as an administrator of any other facility. (e) Pursuant to Section 429.176, F.S., facility owners must notify the Agency Central Office within 10 days of a change in facility administrator on the Notification of Change of Administrator form, AHCA Form 3180-1006, [illegible], which is incorporated by reference and available online at: http://www.flrules.org/Gateway/reference.asp?No	A 077		

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A 077	Continued From page 3 =Ref-04002. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to appoint a separate manage for each facility. Findings included: Review of the facility's roster showed Staff E with the title of assistant administrator for the facility and also for a different facility. On [redacted] at 10:00 AM, the Administrator stated, "I thought that the manager could be in 2 facilities." Class III	A 077		
A 085 SS=D	58A-5.0191(7) FAC Training - Nutrition & Food Service (7) NUTRITION AND FOOD SERVICE. The administrator or person designated by the administrator as responsible for the facility's food service and the day-to-day supervision of food service staff must obtain, annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility. This requirement does not apply to administrators and designees who are exempt from training requirements under paragraph 58A-5.020(1)(b). A certified food manager, licensed dietician, registered dietary technician or	A 085		

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A 085	Continued From page 4 health department sanitarian is qualified to train assisted living facility staff in nutrition and food service. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide proof of a current 2 hour Nutrition and Food Service training for two of five sampled staff, (Staff B and D). Findings included: Review of Staff B's records showed a nutrition and food service training dated to . Review of Staff D's records showed the same training dated to . On at 10:00 AM, the Administrator stated, "I have to check because I think everyone did the training." Class III	A 085		
A 093 SS=D	58A-5.020(2) FAC Food Service - Dietary Standards (2) DIETARY STANDARDS. (a) The meals provided by the assisted living facility must be planned based on the current USDA Dietary Guidelines for Americans, 2010, which are incorporated by reference and available for review at: http://www.flrules.org/Gateway/reference.asp?No=Ref-04003, and the current summary of Dietary Reference Intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academies, 2010, which are incorporated by reference and available for review at:	A 093		

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A 093	Continued From page 5 http://iom.edu/Activities/Nutrition/SummaryDRIs/~/media/Files/Activity%20Files/Nutrition/DRIs/New%20Material/5DRI%20Values%20SummaryTables%2014.pdf. Therapeutic diets must meet these nutritional standards to the extent possible. (b) The residents' nutritional needs must be met by offering a variety of meals adapted to the food habits, preferences, and physical abilities of the residents, and must be prepared through the use of standardized recipes. For facilities with a licensed capacity of 16 or fewer residents, standardized recipes are not required. Unless a resident chooses to eat less, the facility must serve the standard minimum portions of food according to the Dietary Reference Intakes. (c) All regular and therapeutic menus to be used by the facility must be reviewed annually by a licensed or registered dietitian, a licensed nutritionist, or a registered dietetic technician supervised by a licensed or registered dietitian, or a licensed nutritionist to ensure the meals meet the nutritional standards established in this rule. The annual review must be documented in the facility files and include the original signature of the reviewer, registration or license number, and date reviewed. Portion sizes must be indicated on the menus or on a separate sheet. 1. Daily food servings may be divided among three or more meals per day, including snacks, as necessary to accommodate resident needs and preferences. 2. Menu items may be substituted with items of comparable nutritional value based on the seasonal availability of fresh produce or the preferences of the residents. (d) Menus must be dated and planned at least 1 week in advance for both regular and therapeutic diets. Residents must be encouraged to participate in menu planning. Planned menus	A 093		

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A 093	Continued From page 6 must be conspicuously posted or easily available to residents. Regular and therapeutic menus as served, with substitutions noted before or when the meal is served, must be kept on file in the facility for 6 months. (e) Therapeutic diets must be prepared and served as ordered by the health care provider. 1. Facilities that offer residents a variety of food choices through a select menu, buffet style dining, or family style dining are not required to document what is eaten unless a health care provider's order indicates that such monitoring is necessary. However, the food items that enable residents to comply with the therapeutic diet must be identified on the menus developed for use in the facility. 2. The facility must document a resident's refusal to comply with a therapeutic diet and provide notification to the resident's health care provider of such refusal. (f) For facilities serving three or more meals a day, no more than 14 hours must elapse between the end of an evening meal containing a protein food and the beginning of a morning meal. Intervals between meals must be evenly distributed throughout the day with not less than 2 hours nor more than 6 hours between the end of one meal and the beginning of the next. For residents without access to kitchen facilities, snacks must be offered at least once per day. Snacks are not considered to be meals for the purposes of the time between meals. (g) Food must be served attractively at safe and palatable temperatures. All residents must be encouraged to eat at tables in the dining areas. A supply of eating ware sufficient for all residents, including adaptive equipment if needed by any resident, must be on (h) A 3-day supply of nonperishable food, based	A 093		

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A 093	Continued From page 7 on the number of weekly meals the facility has with residents to serve, must be on at all times. The quantity must be based on the resident census and not on licensed capacity. The supply must consist of foods that can be stored safely without refrigeration. Water sufficient for drinking and food preparation must also be stored, or the facility must have a plan for obtaining water in an emergency, with the plan coordinated with and reviewed by the local disaster preparedness authority This Statute or Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to obtain food temperatures of foods delivered to the facility upon arrival. In addition, the facility failed to provide snacks to the residents, failed to maintain a 3-day emergency food supply enough for the current census and failed to note substitutions on the scheduled menu when other foods were offered. Findings included: 1) On , at 9:10 AM, observed at the kitchen cabinet, 3-day emergency reserve food supply low; 7 cans of fruits, 36 (8 oz) Ensure, 3 boxes of dry cereal, 1 gl. Hawaiian Punch and 6 cans of Sardines. At 10:00 AM, when the Administrator arrived, she brought food supply for the emergency 3-day supply and stated, "I just brought more food for the reserve, what happens is that the staff takes things from there to use; I am going to have to lock the cabinet. I just had the inspection in , and everything was good." 2) Review of the facility's menu for , showed for breakfast, juice, dry or cooked cereal,	A 093		

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A 093	Continued From page 8 milk, 1 slice of bread with margarine. Menu was not updated to note substitutions. On , at 11:30 AM, observed lunch being delivered to the facility. The food temperature was not at the appropriate minimum temperatures required by law. White rice 102 degrees, soup 100 degrees, beef chunks 102 degrees and green salad 52 degrees. Hot temperatures should have been at least 135 degrees and temperatures lower than 41 degrees. On , at 11:30 AM, Staff B stated, "I do not take the temperature of the food when arrives, but I heat it up in the microwave anyway before serving it." 3) On , at 9:15 AM, Resident 3 stated, "For breakfast, they give me café con leche and toast with butter or crackers. They do not give me snacks." On , at 9:25 AM, Resident 4 stated, "Once a month, maybe they give me something for snack. I eat dinner around 5:30 PM until the next morning around 8:00 am." On , at 9:40 AM, Resident 1 stated, "For breakfast, they give us café con leche with toast, but I drink chocolate, I do not like coffee." On , at 11:50 AM, Resident 2 stated, "I eat breakfast at 7:00 am, café con leche and bread with butter; sometimes, corn flakes. There is no snack. The food is good, but it could be better. They always give us beef and soup; the soup is not good and sometimes is the same soup for 3 or 4 days. At night, usually is the same food from the morning, that is at 5:00 PM. I am	A 093		

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A 093	Continued From page 9 always hungry until the next day. I have asked few times and they give me bread or crackers." Class III	A 093		
A 095 SS=D	58A-5.020(4) FAC Food Service - Food Service (4) CANTRACTED FOOD SERVICE. When food service is . . . . . by the facility, the facility must ensure that the . . . . . food service meets all dietary standards imposed by this rule and is adequately protected upon delivery to the facility pursuant to subsection 64E-12.004(4), F.A.C. The facility must maintain: (a) A copy of the current contract between the facility and the food service contractor. (b) A copy of the annually issued certificate or license authorizing the operation of the food service contractor issued by the applicable regulating agency. The license or certificate must provide documentation of the food service contractor's compliance with food service regulatory requirements This Statute or Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to ensure that the . . . . . food service met all dietary standards including a current license authorizing the operation of the food service contractor issued by the applicable regulating agency. Findings included: On , at 11:30 AM, observed lunch being delivered to the facility. The food temperature was not at the appropriate minimum temperatures required by law. White rice 102	A 095		

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A 095	Continued From page 10 degrees, soup 100 degrees, beef chunks 102 degrees and green salad 52 degrees. Hot temperatures should have been at least 135 degrees and temperatures lower than 41 degrees. Review of the State's inspection of the restaurant used that provided the foods to the facility showed a forged restaurant name, address and license number. On at 11:30 AM, Staff B stated, "I do not take the temperature of the food when arrives, but I heat it up in the microwave anyway before serving it." On at 9:40 AM, Resident 1 stated, "Staff B gave the order to give me eggs because I cannot eat that food." On at 10:00 AM, the Administrator stated, "I started using the catering company about 6 months ago; it was recommended to me by other operators." On at 11:50 AM, Resident 2 stated, "The food is good, but it could be better. They always give us beef and soup; the soup is not good and sometimes is the same soup for 3 or 4 days." Class III	A 095		