STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967447	02/28/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Vizcaya By The Sea	1621 North Ocean Blvd Pompano Beach, FL 33062	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0000 - - Initial Comments
St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= B
St - A - 0090 - 58a-5.0191(11) Fac - Training - S-S= B
St - A - 0123 - 58a-5.021(4) Fac - Fiscal - Resident Trust Funds & Adv Payments S-S= D
St - A - 0126 - 58a-5.021(7) Fac - Fiscal - Resident Accounting S-S= D

Specific Tag Findings:

0000-Initial Comments
An unannounced complaint surveys, CCR #2013012131, #2014000504, were conducted at Vizcaya by the Sea on The facility had deficiencies found at the time of the visit.

Deficient practice identified at the following:

Complaint #2013012131 substantiated at A0030, A0123 and A0126.

Complaint #2014000504 substantiated at A0078, A0084, and A0090.

0078-Staffing Standards - Staff 58A-5.019(2) FAC

Based on record review and interviews, the facility failed to ensure that all staff members had documentation within their personnel file indicating freedom of on an annual basis, for 3 out of 5 sampled staff members (Staff D, E, and F).

The findings include:

A record review of employee personnel files revealed no documentation for 2013 that Staff D, E, and F were free from

The last test completed reflecting freedom of was conducted on for Staff D, for Staff E and for Staff F.

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On _ _ _ _ at 2:00 PM an interview was conducted with the Assistant Administrator and the Administrator by phone. The Assistant Administrator stated she could not find any paperwork indicating the aforementioned staff members were free from _ _ in 2012 for Staff D and E and in 2013 for Staff D, E, and F.

Class _

0090-Training - _ _ _ _ **58A-5.0191(11) FAC**

Based on record review and interviews, the facility failed to ensure that 1 out of 5 staff members (Employee D) had received at least one hour of training in the facility's policy and procedures regarding _ _ _ within 30 days after employment.

The findings include:

During a record review of the personnel file for Employee D, it was revealed that there was an employment start date of _ _ _ _ and that she has been performing direct care with residents since her hire date. Her personnel file did not contain any documentation of one hour training on _ _

During an interview conducted on _ _ _ at 1:50 PM with Employee D, she revealed that she was not sure if she ever completed the _ _ _ _ training. On _ _ _ _ at 2 PM, an interview was conducted with the Assistant Administrator and the Administrator by phone. Both confirmed that Employee D was missing the _ _ _ _ training. The Assistant Administrator and the Administrator acknowledged the findings.

Class _ _

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0123-Fiscal - Resident Trust Funds & Adv Payments 58A-5.021(4) FAC

Based on record review and interviews, the facility failed to ensure that resident funds, including petty cash and , were accurately accounted, for in 11 out of 11 sampled residents (Residents #7, #12, #14, #16, #19, #24, #39, #40, #47, #49, and #50), who had personal funds held by the facility for safekeeping.

The findings include:

a) A request was made on at approximately 11:25 AM for a list of residents that the facility kept funds or other money for safekeeping for residents (e.g., resident trust accounts). The Administrator stated she does not keep any money for residents. When asked again if she kept any money for residents, she stated she did keep funds for Residents #49 and #50.

The Resident Care Supervisor presented a binder titled "Resident Funds Log." A review of the binder indicated the facility kept resident funds for six residents (Residents #12, #16, #24, and #47) and Resident #49 and #50, who no longer reside at the facility.

At 11:40 AM, the Resident Care Supervisor requested the Resident Funds Logs. She stated that the Administrator told her to pull out only the records for Residents #49 and #50. This writer told the supervisor that surveyors are allowed to look at all records deemed necessary for the survey.

Resident Fund Logs reviewed for Residents #49 and #50 revealed initials of each resident signed next to every payment amount. Payments were made at least once a month, except for 2013. In an interview conducted on at 11:40 AM, the Assistant Administrator did not know why Residents #49 and #50 did not receive a payment for the month of and stated they received a payment any time a request was made. The Assistant Administrator provided one receipt for Resident #49 in the amount of $50.00 and for Resident #50 in the amount of $100.00 with no indication of what the receipt was for.

b) Review of the Resident Fund Logs revealed the following:

1) Resident #12's log indicates he is a Waiver client and lists $162.00 as the amount received on and a payment made for the same amount on . Neither of these transactions was initialed by the resident.

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2) Resident #16's log indicates he is a Waiver client and the amounts dispersed were typically $54.00, indicating he was receiving . . . . Four payouts were not initialed by the resident.
3) Resident #24's log indicates he is a Waiver client and amounts dispersed were all $54.00, indicating he was receiving . . . . One payment on . . . . was not initialed by the resident.
4) Resident #47's log indicates she is a Waiver client and a date of . . . . is written with the words, 'Medicaid billing.' The rest of the log is blank.
5) There were no ongoing balances maintained for any of the aforementioned resident's accounts.

c) The Assistant Administration presented a box with multiple envelopes and receipts. The following was found with no Resident Funds Log for any of the residents:

1. Resident #7 - an envelope with $30.00 written on it dated . . . . /12. Two receipts equaling $30.00 enclosed in the envelope. A copy of a check written to the facility in the amount of $30.00 was enclosed in the envelope. No resident initials were listed next to the money the resident received.
2. Resident #14 - an envelope with amounts paid for haircuts, dates missing from some of the amounts listed, and no initials next to the money given to the resident. A receipt for $72.00 was not listed on the envelope/ledger to show that the money was given to the resident. A photocopy of five $20.00 bills was enclosed in the envelope with 'received on . and unidentified initials written on it. Six dollars was found in the envelope.
3. Resident #19 - an envelope had various dates from . . . . through . . . . . written on it by the Assistant Administrator, indicating money received by the resident. The resident signed off on all but one of the payments received in the amount of $1.00.
4. Resident #39 - an envelope with a total of $80.00 written on the top. Various dates were listed that the resident received money, but no initials for the times she received it. Various receipts were in the envelope along with $25.00.
5. Resident #40 - envelope with $125.00 written on it dated . . . . with the Assistant Administrator's initials. Five dates for payouts to the resident were listed without his initials. Another envelope for Resident #40 listed $799 at the top with a date of . . . . It lists $40.00 petty cash underneath. Various petty cash amounts were listed with a date of . . . . and a balance of $125.00.
6. Resident #40 and two residents, who are no longer residing at the facility, were written on an envelope along with 'Vizcaya Petty Cash.' Three receipts from the same account were in the envelope. A receipt from the bank dated . . . . indicated a balance of $1,833.57. A total of $700.00 was withdrawn from this account in three separate transactions. The balance on the most current receipt dated . . . . was $4,037.50. Three receipts totaling $90.00 were in the envelope, one receipt for Resident #40 and one receipt each for the residents no longer residing at the facility.
There was no balance(s), payments made to residents, or resident initials listed on the envelope. One dollar was found in the envelope.

There were no ongoing balances maintained for any of the aforementioned resident's accounts; from the information above, it was difficult to discern what the beginning balance was for each of the residents.

d) During record review no quarterly statements were found for any of the aforementioned residents. On _____ at approximately 11:55 AM, the Resident Care Supervisor stated she asked the Administrator if there were any quarterly statement copies for the residents that funds were kept for. The supervisor stated that the Administrator said that most everyone is private pay, so she did not have anyone that would need a quarterly statement.

In an interview conducted on _____ at 12:26 PM, the Administrator stated no resident receives _____, she is not a fiduciary payee for any resident, and stated she keeps small amounts of petty cash for some residents. She stated sometimes she would forget to have the residents sign off for money received. She stated if the Assistant Administrator was in the facility, she would give money to the residents and did not have access to the Resident Funds Logs. She stated that she gave quarterly statements to Residents #49 and #50's guardian; three attempts to contact their guardian were made with no response. The Administrator added that copies were in the facility and wanted to speak with the Assistant Administrator regarding where they were stored. However, by the end of the survey, the Assistant Administrator produced no copies of resident ' s quarterly statements. The Administrator acknowledged she did not have a "great" accounting system and that she was no longer keeping money for new residents.

Class III

0126-Fiscal - Resident Accounting 58A-5.021(7) FAC

Based on record review and interviews, the facility failed to ensure that quarterly statements were given to 11 out of 11 sampled residents (Residents #7, #12, #14, #16, #19, #24, #39, #40, #47, #49, and #50) who the facility kept petty cash and _____ for safekeeping.

The findings include:

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A request was made on [redacted] at approximately 11:25 AM for a list of residents that the facility kept [redacted] funds or other money for safekeeping for residents (e.g., resident trust accounts). The Administrator stated she does not keep any money for residents. When asked again if she kept any money for residents, she stated she did keep funds for Residents #49 and #50.

The Resident Care Supervisor presented a binder titled "Resident Funds Log." A review of the binder indicated the facility kept resident funds for six residents (Residents #12, #16, #24, and #47) and Resident #49 and #50, who no longer reside at the facility. However, there was no documentation located within this binder or the resident's file indicating each resident or the legal guardian had received quarterly statements detailing all income and expense with current balances for aforementioned residents.

In an interview conducted on [redacted] at 12:26 PM, the Administrator stated no resident receives [redacted], she is not a fiduciary payee for any resident, and stated she keeps small amounts of petty cash for some residents. She stated sometimes she would forget to have the residents sign off for money received. She stated if the Assistant Administrator was in the facility, she would give money to the residents and did not have access to the Resident Funds Logs. She stated that she gave quarterly statements to Residents #49 and #50's guardian. Three attempts to contact their guardian were made with no response. The Administrator added that copies were in the facility and wanted to speak with the Assistant Administrator regarding where they were stored. By the end of the survey, the Assistant Administrator produced no copies of resident ' s quarterly statements. The Administrator acknowledged she did not have a "great" accounting system and that she was no longer keeping money for new residents.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Vizcaya By The Sea
1621 North Ocean Blvd
Pompano Beach, FL 33062

Dear Administrator:

Re: CCR #2013012131 and #2014000504

This letter reports the findings of a complaint survey that was conducted on , 2014 by representatives from this office. Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within **thirty (30) days** of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after **2014** to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the representatives. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD/dso
Enclosure: State form 5000-3547
XG90

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