STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966525	**07/06/2015**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
ROYAL DESTINY HOME CARE LLC	**3260 NW 179 STREET CAROL CITY, FL 33056**	

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

0000 - Initial Comments

A Standard Biennial survey was conducted on , 2015 and concluded on , 2015. Royal Destiny Home Care Llc had the following deficiencies at time of the survey:

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on observation and record review the facility failed to ensure that the health assessments for two out of three (#1 and #3) sampled residents documented what type of assistance was needed with medications and what type of assistance was needed with activities of daily living.

Findings included:

Observation on at 8:33 am found Residents #1 and #3 were seating at the seating area watching TV.

Record review on revealed Resident #1's health assessment indicated that he was bedridden, and he required total care to ambulate and transfer. Record review on revealed that Resident #3's health assessment did not have specify if the resident needed help with self-administrator of medications.

Class III

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

Based on observations, record review, and interviews the facility failed to maintain a written record any illnesses that resulted in medical attention for one out four (4) residents sampled.

Findings included:

Observation on at 8:31 am during tour revealed that Resident #4's personal items were in #.

Interviews on between 8:30 am to 2:00 pm, Staff A and Administrator stated that Resident #4 went to the hospital on . They also stated that rescue was called to take Resident #4 to the hospital.

Record review on revealed that Resident #4 was not discharged from the facility's admission/discharged; it was not indicated that she was hospitalized. Record review on revealed the facility did not have any written information regarding Resident #5's change in condition that resulted in medical attention.

Class III

0051 - Medication - Pill Organizers - 58A-5.0185(2) FAC

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0051 Continued From page 1

Based on observation, record review, and interview the facility failed to ensure that a licensed nurse managed pill organizers for two of three Residents (1 and 2). The facility also failed to ensure that residents who used pill organizers self-administered their medications.

Findings included:

Observation on at 8:41 am revealed two pill organizers with seven compartment labeled for Residents #1 and #2, which contained medications inside Staff A's the top of a dresser.

Interview on at 8:45 am Staff A stated that the Administrator fills the pill organizer each day to make it easier to give residents their medications.

Interview on at 11:30 am the Administrator confirmed that fills the pill organizer for the Residents #1 and #2.

Record review found that the Administrator was not a licensed nurse. Record review found Resident #1 and #2's health assessment (dated and /) documented that the resident needed assistance with self-administration of medications.

Class III

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

Based on record review and interview the facility failed to have the Medication Observation Records (MORs) for three out of four (#1-3) sampled residents.

Findings included:

Observation on at 8:38 am during facility tour found medications inside Staff A's the top of a dresser and inside a box.

Record review on revealed that the facility did not have MORs for Residents #1-3.

Interview on at 10:30 am the Administrator claimed to have the MORs in her house, and she did not bring it to the facility because she was not coming from her home. The Administrator also stated, " I was getting ready for you; therefore, I took the MORs to my house to have it ready."

Interview on between 8:30 am to 2:00 pm with Staff A and the Administrator revealed that Residents #1-3 had their medications on early in the morning; they also stated that Staff A assisted them with self-administration of medication everyday two times a day. Staff A confirmed that she did not sign any MORs for Residents #1-3.

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0054 Continued From page 2

Class III

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on record review and interview the facility failed to have proof of the Administrator's high school diploma or GED.

Findings included:

Record review on revealed that the facility's Administrator did not have evidence of having a high school diploma or its equivalent.

Interview on at 10:00 am the Administrator acknowledged that there was no staff records in the facility including her high school diploma at time of survey.

On the facility faxed the Administrator's proof of completing high school.

Class III

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

Based on observation, record review, and interview the facility failed to ensure for three out of three (Administrator, Administrator Assistant, and Staff A) staff had written statements from a health care provider documenting that the individual does not have any signs or symptoms of communicable

Findings included:

Observation on at 8:30 am found Staff A alone in the facility caring and providing personal services to Residents #1- 3.

Record review on revealed that the Administrator, Administrator assistant, and Staff A did not have written statements from a health care provider documenting that the individual does not have any signs or symptoms of communicable .

Interview on at 10:40 am with the Administrator acknowledged that staff did not have any documentation from a health care provider.

On the facility faxed the statement for the Administrator. The facility faxed documents for the Administrator assistant but they did not meet the requirements.

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0078 Continued From page 3

Class III

0079 - Staffing Standards - Levels - 58A-5.019(3) FAC

Based on observation and interview the facility failed to have a written work schedule that reflects its 24-hour staffing pattern for a given time period.

Findings included:

Observation on at 8:30 am revealed that there was no staffing schedule available to review.

Interview on at 12:00 pm the Administrator acknowledged that the facility did not have a staffing schedule available for review.

Class III

0080 - Training - Core & Competency Test - 429.52(1-2) FS; 58A-5.0191(1) FAC

Based on record review and interview the facility failed to have the Administrator's 12 hours of continuing education in topic related to assisted living facilities.

Findings included:

Record review on revealed that the Administrator did not have evidence of completing 12 hours of continuing education in topics related to assist living facilities.

Interview on at 10:30 am the Administrator confirmed that she did not have the 12 hours of continuing education training in the facility at time of survey.

On the facility faxed the Administrator's 12 hours of continuing education training.

Class III

0081 - Training - Staff In-Service - 58A-5.0191(2) FAC

Based on record review and interview the facility failed to ensure that two out of three (Administrator assistant and Staff A) completed in-service training within 30 days of employment.

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0081 Continued From page 4

Findings included:

Observation on at 8:30 am found Staff A alone in the facility caring and providing personal services to Residents #1- 3.

Record review on revealed the Administrator assistant and Staff A did not have the following training: Elopement Response Training, Emergency Preparedness & Evacuation Training, Incident Reporting Training, and Resident Rights and Recognizing Reporting , Neglect, and Training, Control Training, ADL and Behavioral Needs Training, Emergency Preparedness & Evacuation Training, Incident Reporting Training.

Interview on at 10:30 am the Administrator claimed to have the Staff records were at her house and she did not bring them to the facility because she was not coming from her home.

Class III

0082 - Training - .../ - 58A-5.0191(3) FAC

Based on record review and interview the facility failed to ensure that three out of three (Administrator, Administrator assistant, and Staff A) staff completed a course on and .

Findings included:

Record review on revealed that the Administrator, Administrator assistant, and Staff A did not have evidence of completed / training at the facility.

Interview on at 11:40 a.m. the Administrator did not have evidence of / training in the facility at time of survey.

On the facility faxed proof of / training for the Administrator and Staff A.

Class III

0083 - Training - First Aid and - 58A-5.0191(4) FAC

Based on record review and interview the facility records did not include evidence of and First Aid training for three out of three (Administrator, Administrator assistant and Staff A) staff.

Findings included:

Observation on at 8:30 am found Staff A alone in the facility caring and providing personal services to

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SUMMARY STATEMENT OF DEFICIENCIES
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0083 Continued From page 5

Residents #1- 3.

Record review on revealed that the Administrator, Administrator assistant, and Staff A did not have evidence of and First Aid training.

Interview on at 8:30 am Staff A stated that she worked the entire night alone.

During an interview on at 11:05 am the Administrator acknowledged that Staff did not have evidence of and First Aid training at time of survey.

On the facility faxed Staff A's training and the Administrator assistant training.

Class III

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(5) FAC

Based on record review and interview the facility failed to ensure three out of three (Administrator, Administrator assistant, and Staff A) staff received the 4 hour initial self-administration of medications assistance training.

Findings included:

Record review on at 11:21 am revealed that the Administrator, Administrator assistant, and Staff A received 4 hours of self-administration of medication assistance training.

Record review on revealed that Residents #1-3 health assessments reflected that they needed assistance with self-administration of medications.

Interview on at 11:30 am the Administrator acknowledged that there was no proof of the self-administration of medication training for staff.

Class III

0085 - Training - Nutrition & Food Service - 58A-5.0191(6) FAC

Based on observation, record review, and interview the facility failed to have documentation that one out of three (Administrator) staff received 2 hours of nutrition and food service training.

Findings included:

Observation on at 1:25 pm found the Administrator preparing and serving the lunch to Residents #1-3.

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0085 Continued From page 6

Record review on at 11:00 am reveled that the Administrator did not have documentation of receiving 2 hours of nutrition and food service training.

Interview with Administrator on at 11:30 am revealed that Staff did not have the training in the facility at time of survey.

On the facility faxed the Administrator 2 hours of training.

Class III

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

Based on record review and interview the facility failed to have three out of three (Administrator. Administrator assistant, and Staff A) staff trained in the facility policies and procedures regarding ( ).

Findings included:

Record review showed the facility failed to have the Administrator, Administrator assistant, and Staff A trained in the facilities policies.

Interview on at 11:00 a.m. the Administrator confirmed that there was no proof that staff was trained in policies and procedures.

Class III

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

Based on observations and interview the facility failed to ensure that appliance and the air conditioner (AC) were in good working order.

Findings included:

Observation on at 8:30 am revealed that the facility's AC was not working. Also, the facility's refrigerator appeared unkept and had a foul odor. Observation on at 10:00 am found the Administrator turned the AC down and it started to work a 60 degrees; however, an AC arrived to the facility to check the AC.
Interview on at 1:00 pm AC explained that the AC's compressor was not working well, and it needed to be replaced as soon as possible because it will shut down soon.
Interviews with Resident #1 and 3 revealed that they slept with no AC for three days.

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0152 Continued From page 7

Class III

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

Based on observation, interview, and record review, the facility failed to ensure that three of three (Administrator, Administrator assistant, and Staff A) staff had completed employment applications with references. The facility failed to provide evidence of Level II background screenings for three out of three (Administrator, Administrator assistant, and Staff A) staff.

Findings included:

Observation on at 8:30 am found Staff A alone in the facility caring and providing personal services to Residents #1- 3.

Interview on at 8:30 am Staff A stated that she had been working at the facility for four months.

Record review on revealed that the facility did not have completed applications with references for the Administrator, Administrator assistant, and Staff A.

Interview on at 10:30 am the Administrator claimed to have the Staff records at her house, and she did not bring them to the facility because she was not coming from her home.

Record review on revealed that the Administrator, Administrator assistant, and Staff A did not have proof of background screening at the facility.

Interview on at 8:30 am with Staff A revealed that she started to work in the facility four months ago, and she was a caregiver; therefore, she assisted with medications, cooking and assisted Residents #1-3 with activities of daily living.

Interview on at 10:30 am the Administrator revealed that the Administrator assistant had been working in the facility for six years. Also, the Administrator stated that Staff A started to work in the facility since 2015. She stated that the facility Staff did not have any proof (picture ID and/or social security numbers) to check for eligible background screening at time of survey.

On the facility faxed background screenings for the Administrator and Staff A. The Administrator assistant background screening was check on the website.

Class III

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

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0162 Continued From page 8

Based on record review and interview the facility failed to have completed resident contracts and signed consent forms for unlicensed staff to assist with self- administration of medication for four out of four (#1-4) residents. The facility also failed to have weight records documented every six months for three out of four (#2-4) residents.

Findings included:

Record review on revealed that Resident #1's contract did not have a monthly rate (signed on), also the resident did not have a signed consent form for unlicensed staff to assist with self-administration of medications.

Record review on at revealed that Resident #2's contract did not have a monthly rate (signed on), also the resident did not have a signed consent form for unlicensed staff to assist with self-administration of medications.

Record review on at revealed that Resident #3's contract did not have a monthly rate (signed on).

Record review on at revealed that Resident #4's contract did not have a monthly rate (signed on), also the resident did not have a signed consent form for unlicensed staff to assist with self-administration of medications.

Interview on at 1:44 pm Staff A confirmed the facility did not have signed consent for unlicensed staff to assist with self-administration of medications for Residents #1, 2 and 4. Also confirmed that contracts did not have monthly rates.

Record review on found Resident #2's last weight recorded was dated . Resident #3's last weight record was dated . Resident #4's last weight record was dated .

Interview on at 12:00 pm the Administrator acknowledged that the facility did not have weight records logged every six months.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Royal Destiny Home Care Llc
3260 Nw 179 Street
Carol City, FL 33056

Dear Administrator:

This letter reports the findings of a Standard Biennial licensure survey that was concluded on , 2015 by representative(s) of 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 days of the date of this letter unless the Agency has approved another timeframe.

Staff from this office will conduct a review after 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 surveyor(s). Should you have any questions please call Verlande Exil, Health Facility Evaluator Supervisor at (305) 593-3100.

Sincerely,

Arlene Mayo-Davis, RN
Field Office Manager

AMD:ve
Enclosure
XG90

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