

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>105910</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>07/01/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>CORAL REEF NURSING &amp; REHABILITATION CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP <b>9869 SW 152ND STREET MIAMI, FL 33157</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0921  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Few</b>	<p><b>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</b></p> <p>Based on observations, interviews, and records review, the facility failed to maintain a clean and sanitary environment as evidenced by (1) Dirty air vents in the clean/folding area of the laundry room, (2) The facility failed to clean shower rooms between resident use for two out of three common shower rooms observed in the facility as evidenced by foul odors and visibly soiled shower room floors and tub. This facility's deficient practice has the potential to affect all residents in the facility that use the common showers. There were 108 residents residing in the facility at the time of the survey. The Findings included : On June 29, 2020 at 10:10 AM during observation of the laundry room with Housekeeping aid ( Staff A) revealed, the air ducts ceiling vents appeared uncleaned, was completely covered with dust and stains also noted on and around the metal screen that covered the airducts. The Housekeeping staff agreed the airducts appeared dirty and explained that the maintenance department handled the cleaning of the ceiling vents. Staff A stated she had not communicated the issue to said department but would immediately inform the Maintenance Director. ( Photographic evidence ) Observation on 6/29/2020 at 10:30 AM revealed, the common shower room located north unit did not appear clean; the bathtub in the common shower room was covered with multiple pink and brown stains. (Photographic evidence) Observation on 6/29/2020 at 10:58 AM revealed, the common shower room located in the west unit was also unclean, foul urine-like odor noted in the room. Yellow liquid stains were noted all over the floor. (Photographic evidence) Interview on 6/29/20 at 2:40 PM with the Housekeeping Director explained, that housekeeping staff cleaned the common shower rooms. They cleaned it once a day, every day, before they left for the day. Observation of the laundry room on 6/29/20 at 2:53 PM with the Housekeeping Director revealed, the air ducts ceiling vents appeared to have been cleaned, and free of dust. Multiple dark and brown/rust-like Stains around and on the metal screen that covered the airducts remained. (Photographic evidence) . Observation on 6/29/2020 at 2:55 PM with the Housekeeping Director in the West Wing shower room revealed, the foul smell and yellow stains on the floor. The Housekeeping director explained she could not smell the urine-like foul odor and indicated it was possible because the mask she wore was blocking the odor. The Housekeeping director acknowledged the yellow stains on the floor. During the observation, the Housekeeping called Staff A. Staff A explained that she cleaned the shower room earlier that day around one, (PM) because staff was bringing residents to the shower before then . The Housekeeping Director pointed to the stains and asked the aid to clean it again, be sure to scrub it well. Observation on 6/29/2020 at 2:57 PM with the Housekeeping Director revealed, the common shower room located North Wing did not appear clean; the bathtub located in the room was covered with multiple pink and brown stains. (See Photo). During an interview on 6/30/20 at 11:58 AM with the Director of Nursing (DON) and the Assistant Administrator. The Assistant Administrator reported the protocol was that the shower rooms should be clean after each use. She explained that a housekeeper in each unit was responsible for cleaning the shower room on each unit. The nurse or the Certified Nursing Assistant (CNA )will notify the housekeeper after the shower of each resident. Upon discussion of the above - mentioned concerns, the Assistant to the Administrator stated there was no excuse for the unclean showers. The housekeepers should be cleaning it after each use as per the cleaning policy. They kept one housekeeper stationed in each unit. Record review of the facility's policy dated 1/2/2019 and titled Cleaning and Disinfecting revealed the Policy Purpose: To prevent infectious spread from items or environment and shower rooms to resident/or staff. The process included; 4. Perform routine disinfection of items used in daily care practices . Disinfect shower rooms between each use with approved product by infections category and follow manufactures instructions. Record review of the facility's Environmental Services Cleaning Guidebook revealed a basic cleaning concept and checklist titled Hospital Clean. Hospital clean is a measure of cleanliness routinely maintained in care areas of the health care setting. Cleaning practices are periodically monitored and audited with feedback and education. The checklist included but not limited; Walls, ceiling and doors are free of visible dust, gross soil, streaks, spider webs and handprints. Bathroom fixtures including toilets, sinks tubs and showers are free of streaks, soils, stains and soap scum. Items that are broken, torn, cracked or malfunctioning are replaced, and Noncritical medical equipment is disinfected between clients/patients/residents.</p>		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE		(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.