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
	AL11968213	A. BUILDING: _____ B. WING _____	04/16/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LA FINCA ALF, INC	17705 SW 218 STREET MIAMI, FL 33170

(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
CZ827	408.812 FS Unlicensed Activity 408.812 Unlicensed activity.- (1) A person or entity may not offer or advertise services that require licensure as defined by this part, authorizing statutes, or applicable rules to the public without obtaining a valid license from the agency. A licenseholder may not advertise or hold out to the public that he or she holds a license for other than that for which he or she actually holds the license. (2) The operation or maintenance of an unlicensed provider or the performance of any services that require licensure without proper licensure is a violation of this part and authorizing statutes. Unlicensed activity constitutes harm that materially affects the health, safety, and welfare of clients, and constitutes . . . . . and neglect, as defined in s. 415.102. The agency or any state attorney may, in addition to other remedies provided in this part, bring an action for an injunction to restrain such violation, or to enjoin the future operation or maintenance of the unlicensed provider or the performance of any services in violation of this part and authorizing statutes, until compliance with this part, authorizing statutes, and agency rules has been demonstrated to the satisfaction of the agency. (3) It is unlawful for any person or entity to own, operate, or maintain an unlicensed provider. If after receiving notification from the agency, such person or entity fails to cease operation, the person or entity is subject to penalties as prescribed by authorizing statutes and applicable rules. Each day of operation is a separate offense. (4) Any person or entity that fails to cease operation after agency notification may be fined $1,000 for each day of noncompliance. (5) When a controlling interest or licensee has an interest in more than one provider and fails to	CZ827		

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CZ827	Continued From page 1 license a provider rendering services that require licensure, the agency may revoke all licenses, impose actions under s. 408.814, and regardless of correction, impose a fine of $1,000 per day, unless otherwise specified by authorizing statutes, against each licensee until such time as the appropriate license is obtained or the unlicensed activity ceases. (6) In addition to granting injunctive relief pursuant to subsection (2), if the agency determines that a person or entity is operating or maintaining a provider without obtaining a license and determines that a condition exists that poses a threat to the health, safety, or welfare of a client of the provider, the person or entity is subject to the same actions and fines imposed against a licensee as specified in this part, authorizing statutes, and agency rules. (7) Any person aware of the operation of an unlicensed provider must report that provider to the agency. This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the provider was found to be operating an unlicensed assisted living facility at another address, provided personal care services and assistance with self - administration of medications at both the licensed and the unlicensed locations for one out of ten sampled residents (Resident # 8). Findings Include: Observation during the tour of the unlicensed facility on showed Resident # 8 lying in bed with full side rails all the way up. In an interview on at 3:30 PM, Staff D stated Resident # 8 gets bathed by hospice in the	CZ827		

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CZ827	Continued From page 2 morning once a day. Review of Resident # 8's records in the unlicensed facility revealed Resident # 8 has been under hospice care as of due to . Further observation during the tour of the unlicensed facility revealed a kitchen cabinet with medications prescribed to Resident # 8; however, the medication packs were labeled with the address of another licensed assisted living facility owned by the same operator of the unlicensed ALF. In an interview on at 3:26 PM, Staff A stated, "Residents are here because their families agree to put them here. They call me and ask me if I have space in my ALF (assisted living facilities) and I tell them I have a private home I could rent out to them. My purpose was to open another ALF home and all I'm waiting for is the emergency plan approval. I haven't gotten the approval yet, so that's what is stopping me from submitting my application". Review of the licensed facility's admission/discharge log showed Resident # 8 was admitted on and discharged on . The log showed 'Reason for discharge: Family decision' and 'Place discharged to: [address of unlicensed facility]'. Review of Resident # 8's health assessment dated showed a medical history and diagnoses of 's, , , and . The health assessment showed Resident # 8 also had gait imbalance, memory	CZ827		

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CZ827	Continued From page 3 loss, and was under hospice care. Further review of the health assessment showed Resident # 8 needed total care with all activities of daily living such as Ambulation, Bathing, _, Eating, Self - Care (grooming), Toileting, and transferring. Resident # 8 also needed medication administration. In an interview on at 2:07 PM, Resident # 8's family member stated, "It was proposed by [Staff A]. I drove down and the house was lovely. She told me that she was looking to expand and that she has a real nice home and she could upgrade my mother for better accommodations". In an interview on at 2:58 PM, Staff A stated, "I communicated to the son about the possibility to move her because she was going to be better there, more relaxed. The son came down and saw the house. I had the space available so I figured she would be better there". Unclassified	CZ827		

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A 000	Initial Comments A wellness monitoring and a COVID-19 control monitoring survey was conducted at La Finca ALF, Inc. from , , through , , , , . Deficiencies were identified at the time of the survey.	A 000		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE