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
	AL11965854	A. BUILDING: _____ B. WING _____	R 02/17/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUANY'S HOME	20411 SW 116 ROAD MIAMI, FL 33189

(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 A revisit to a biennial survey, with a limited mental health component, was conducted at Suany's Home on . A deficiency was identified at the time of the survey.	{A 000}		
A 152 SS=D	59A-36.014(3) FAC Physical Plant - Safe Living Environ/Other (3) OTHER REQUIREMENTS. (a) All facilities must: 1. Provide a safe living environment pursuant to section 429.28(1)(a), F.S.; 2. Be maintained free of hazards; and, 3. Ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order. (b) Pursuant to section 429.27, F.S., residents must be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident bedroom or sleeping area must have at least the following furnishings: 1. A clean, comfortable bed with a mattress no less than 36 inches wide and 72 inches long, with the top surface of the mattress at a comfortable to ensure easy access by the resident, 2. A closet or wardrobe space for hanging clothes, 3. A dresser, or other furniture designed for storage of clothing or personal effects, 4. A table or nightstand, bedside lamp or floor lamp, and waste basket; and, 5. A comfortable chair, if requested. (c) The facility must maintain master or duplicate keys to resident bedrooms to be used in the event of an emergency. (d) Residents who use portable bedside commodes must be provided with privacy during	A 152		

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A 152	Continued From page 1 use. (e) Facilities must make available linens and personal laundry services for residents who require such services. Linens provided by a facility must be free of tears, stains and must not be . This Statute or Rule is not met as evidenced by: Based on observations and interview, the facility failed to provide a safe living environment, maintained free of hazards; and ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order. The facility failed to ensure when the facility supplies the furnishings ensure residents bedroom had the required furnishings. Findings: Observation on . . . . . at 10:59 AM showed # occupied by Resident #1 was visible with several holes in the closet on the drywall. Observed # occupied by Resident #3 had a fist size hole in the wall. Observed . . . # occupied by Residents #4 and #5 did not have a waste basket and lamp inside the room. Observed the laundry room which was adjacent to . . # and easily accessible to all residents, had the following unsecured cleaning supplies: 1 bottle Bleach, 1 Can Bug Spray, 1 Can Ajax, 1 Bottle All Purpose Cleaner, 1 Bottle Febreze, and 1.64 Gallons Fabuloso. Interviewed on . . . . . at 12:00 PM, concerning the physical plant of the facility and resident furnishings, the Administrator stated she will have the things fixed. Class III	A 152		

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