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
	AL11966035	A. BUILDING: _____ B. WING _____	01/16/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAS BRISAS HOME CARE	7401 W 34 LANE HIALEAH, FL 33018

(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 biennial re-licensure survey, with a limited mental health component was conducted at Las Brisas Home Care ALF on . The provider had deficiencies identified at the time of the visit.	A 000		
A 030 SS=D	59A-36.007(5) FAC; 429.28( ) FS 429.27 Resident Care - Rights & Facility Procedures 59A-36.007 (5) RESIDENT RIGHTS AND FACILITY PROCEDURES. (a) A copy of the Resident Bill of Rights as described in Section 429.28, F.S., or a summary provided by the Long-Term Care Ombudsman Program must be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to Rule 59A-36.006, F.A.C. (b) In accordance with Section 429.28, F.S., the facility must have a written grievance procedure for receiving and responding to resident complaints and a written procedure to allow residents to recommend changes to facility policies and procedures. The facility must be able to demonstrate that such procedure is implemented upon receipt of a complaint. (c) The telephone number for lodging complaints against a facility or facility staff must be posted in full view in a common area accessible to all residents. The telephone numbers are: the Long-Term Care Ombudsman Program, 1(888)831-0404; , Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida Hotline, 1(800)96- or 1(800)962-2873. The telephone numbers must be posted in close proximity to a telephone accessible by residents	A 030		

AHCA Form 3020-0001

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

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A 030	Continued From page 1 and the text must be a minimum of 14-point font. (d) The facility must have a written statement of its house rules and procedures that must be included in the admission package provided pursuant to Rule 59A-36.006, F.A.C. The rules and procedures must at a minimum address the facility's policies regarding: 1. Resident responsibilities; 2. and tobacco use; 3. Medication storage; 4. Resident elopement; 5. Reporting resident , neglect, and , ; 6. Administrative and housekeeping schedules and requirements; 7. control, sanitation, and standard precautions; 8. The requirements for coordinating the delivery of services to residents by third party providers; 9. Assistive devices; and 10. Physical . (e) Residents may not be required to perform any work in the facility without compensation. Residents may be required to clean their own sleeping areas or apartments if the facility rules or the facility contract includes such a requirement. If a resident is employed by the facility, the resident must be compensated in compliance with state and federal wage laws. (f) The facility must provide residents with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication, pursuant to Section 429.28(1)(d), F.S. The facility must allow unidentified telephone calls to residents. For facilities with a licensed capacity of 17 or more residents in which residents do not have private telephones, there must be, at a minimum, a readily accessible telephone on each floor of each building where	A 030		

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A 030	Continued From page 2 residents reside. 429.28 Resident bill of rights.- (1) No resident of a facility shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law, the Constitution of the State of Florida, or the Constitution of the United States as a resident of a facility. Every resident of a facility shall have the right to: (a) Live in a safe and decent living environment, free from and neglect. (b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy. (c) Retain and use his or her own clothes and other personal property in his or her immediate living quarters, so as to maintain individuality and personal dignity, except when the facility can demonstrate that such would be unsafe, impractical, or an infringement upon the rights of other residents. (d) Unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum. Upon request, the facility shall make provisions to extend visiting hours for caregivers and out-of-town guests, and in other similar situations. (e) Freedom to participate in and benefit from community services and activities and to pursue the highest possible level of independence, autonomy, and interaction within the community. (f) Manage his or her financial affairs unless the resident or, if applicable, the resident's representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as	A 030		

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A 030	Continued From page 3 provided in s. 429.27. (g) Share a room with his or her spouse if both are residents of the facility. (h) Reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals except when prevented by inclement weather. (i) Exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, nor any attendance at religious services, shall be imposed upon any resident. (j) Assistance with obtaining access to adequate and appropriate health care. For purposes of this paragraph, the term "adequate and appropriate health care" means the management of medications, assistance in making , , for health care services, the provision of or arrangement of transportation to health care , , , and the performance of health care services in accordance with s. 429.255 which are consistent with established and recognized standards within the community. (k) At least 45 days' notice of relocation or termination of residency from the facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally , , the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for relocation must be set forth in writing and provided to the resident or the resident's legal representative. The notice must state that the resident may contact the State Long-Term Care Ombudsman Program for assistance with	A 030		

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A 030	Continued From page 4 relocation and must include the statewide toll-free telephone number of the program. In order for a facility to terminate the residency of an individual without notice as provided herein, the facility shall show good cause in a court of competent jurisdiction. (l) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without , interference, coercion, discrimination, or reprisal. Each facility shall establish a grievance procedure to facilitate the residents' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or special interest groups. (2) The administrator of a facility shall ensure that a written notice of the rights, , and prohibitions set forth in this part is posted in a prominent place in each facility and read or explained to residents who cannot read. The notice must include the statewide toll-free telephone number and e-mail address of the State Long-Term Care Ombudsman Program and the telephone number of the local ombudsman council, the Elder Hotline operated by the Department of Children and Families, and, if applicable, , Rights Florida, where complaints may be lodged. The notice must state that a complaint made to the Office of State Long-Term Care Ombudsman or a local long-term care ombudsman council, the names and identities of the residents involved in the complaint, and the identity of complainants are kept confidential pursuant to s. 400.0077 and that retaliatory action cannot be taken against a resident for presenting grievances or for exercising any other resident right. The facility	A 030		

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A 030	Continued From page 5 must ensure a resident's access to a telephone to call the State Long-Term Care Ombudsman Program or local ombudsman council, the Elder Hotline operated by the Department of Children and Families, and , Rights Florida. 429.27 Property and personal affairs of residents.- (1)(a) A resident shall be given the option of using his or her own belongings, as space permits; choosing his or her roommate; and, whenever possible, unless the resident is adjudicated , or , under state law, managing his or her own affairs. (b) The admission of a resident to a facility and his or her presence therein shall not confer on the facility or its owner, administrator, employees, or representatives any authority to manage, use, or dispose of any property of the resident; nor shall such admission or presence confer on any of such persons any authority or responsibility for the personal affairs of the resident, except that which may be necessary for the safe management of the facility or for the safety of the resident. This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed toensure that 2 out of 5 (#2, #4) sampled residents lived in a safe and decent environment, treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy. Findings: An observation on at 7:05AM,	A 030		

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A 030	Continued From page 6 showed in # (Residents #2 and Resident #4) contained an upper storage space closet that contained paper supplies on the right side and facility binders on the left side and in the main closet space below, it contained two cooling devices wrapped up in a large black garbage bag. (Photographic evidence obtained) In an interview on at 8:48AM, the Owner was asked about the upper storage space closet that contained paper supplies on the right side, facility binders on the left side and in the main closet space below contained two cooling devices wrapped up in a large black garbage bag, the Owner stated, "the paper supplies are for the residents #2 and for the facility binders, I have no other place to put them. I need to figure out where else the place them. Yes, the cooling devices do not belong in this either." Class III	A 030		
A 034 SS=D	59A-36.007(9) ASSISTIVE DEVICES (9) ASSISTIVE DEVICES. Facilities are responsible for ensuring the safe usage of a resident's assistive devices. (a) The facility must have policies and procedures that include the requirements and methods for assessing the physical condition of assistive devices that may injure the resident and procedures for recommending repair or replacement for the continuing safety of a resident's assistive device. (b) Documentation of each assistive device a resident uses must be included in the resident's record. (c) Direct care staff using assistive devices while rendering personal services to residents must	A 034		

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A 034	Continued From page 7 know how to operate and utilize the equipment. (d) All assistive devices must be clean, in good repair, and free of hazards. (e) The facility must encourage and allow the resident to function with independence when using the assistive device. This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to implement policies and procedures to ensure methods for assessing the physical condition of assistive devices and to ensure that repairs or replacements were recommended to maintain the continuing safety of residents' assistive devices. Findings: Observation on at 6:42 a.m. revealed a bedside commode inside the shower that was being utilized as a shower chair. The finishing paint on the commode was cracked, and there were signs of rust on all four ⌣ as well as corrosion on the middle bar of the commode. (photographic evidence obtained) Interviewed on at 9:57 am, the Owner stated that she would change the commode and put a new one. Observation on at 10:10 am revealed the bedside commode was replaced during the inspection. No documentation of the facility's method for assessing the physical condition of assisted devices, or of staff training on the method, was provided. Class III	A 034		

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A 052	Continued From page 8	A 052		
A 052 SS=D	429.256( ); 59A-36.008(3) Medication - Assistance with Self-Admin 429.256 (3) Assistance with self-administration of medication includes: (a) Taking the medication, in its previously dispensed, properly labeled container, from where it is stored, and bringing it to the resident. For purposes of this paragraph, an syringe that is prefilled with the proper dosage by a pharmacist and an , that is prefilled by the manufacturer are considered medications in previously dispensed, properly labeled containers. (b) In the presence of the resident, confirming that the medication is intended for that resident, orally advising the resident of the medication name and dosage, opening the container, removing a prescribed amount of medication from the container, and closing the container. The resident may sign a written waiver to opt out of being orally advised of the medication name and dosage. The waiver must identify all of the medications intended for the resident, including names and dosages of such medications, and must immediately be updated each time the resident's medications or dosages change. (c) Placing an oral dosage in the resident's or placing the dosage in another container and helping the resident by lifting the container to his or her . (d) Applying , medications. (e) Returning the medication container to proper storage. (f) Keeping a record of when a resident receives assistance with self-administration under this section. (g) Assisting with the use of a , including removing the cap of a , opening the unit	A 052		

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A 052	Continued From page 9 dose of solution, and pouring the prescribed premeasured dose of medication into the dispensing cup of the . (4) Assistance with self-administration of medication does not include: (a) Mixing, , converting, or medication doses, except for measuring a prescribed amount of liquid medication or breaking a scored tablet or crushing a tablet as prescribed. (b) The preparation of syringes for injection or the administration of medications by any injectable route. (c) Administration of medications by way of a tube inserted in a of the body. (d) Administration of preparations. (e) The use of irrigations or debriding agents used in the treatment of a skin condition. (f) Assisting with , , or preparations. (g) Assisting with medications ordered by the physician or health care professional with prescriptive authority to be given "as needed," unless the order is written with specific parameters that preclude independent judgment on the part of the unlicensed person, and the resident requesting the medication is aware of his or her need for the medication and understands the purpose for taking the medication. (h) Medications for which the time of administration, the amount, the strength of dosage, the method of administration, or the reason for administration requires judgment or discretion on the part of the unlicensed person. (5) Assistance with the self-administration of medication by an unlicensed person as described in this section shall not be considered administration as defined in s. 465.003.	A 052		

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A 052	Continued From page 10 59A-36.008 (3) ASSISTANCE WITH SELF-ADMINISTRATION. (a) Any unlicensed person providing assistance with self-administration of medication must be , or older, trained to assist with self administered medication pursuant to the training requirements of Rule 59A-36.011, F.A.C., and must be available to assist residents with self-administered medications in accordance with procedures described in Section 429.256, F.S. and this rule. (b) In addition to the specifications of Section 429.256(3), F.S., assistance with self-administration of medication includes, orally advising the resident of the name and dosage of the medication and verbally prompting a resident to take medications as prescribed. (c) In order to facilitate assistance with self-administration, trained staff may prepare and make available such items as water, juice, cups, and spoons. Trained staff may also return unused doses to the medication container. Medication, which appears to have been contaminated, must not be returned to the container. (d) Trained staff must observe the resident take the medication. Any concerns about the resident's reaction to the medication or suspected noncompliance must be reported to the resident's health care provider and documented in the resident's record. (e) When a resident who receives assistance with medication is away from the facility and from facility staff, the following options are available to enable the resident to take medication as prescribed: 1. The health care provider may prescribe a medication schedule that coincides with the resident's presence in the facility,	A 052		

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A 052	Continued From page 11 2. The medication container may be given to the resident, a friend, or family member upon leaving the facility, with this fact noted in the resident's medication record, 3. The medication may be transferred to a pill organizer pursuant to the requirements of subsection (2), and given to the resident, a friend, or family member upon leaving the facility, with this fact noted in the resident's medication record, or 4. Medications may be separately prescribed and dispensed in an easier to use form, such as unit dose packaging. (f) Assistance with self-administration of medication does not include the activities detailed in Section 429.256(4), F.S. (g) As used in Section 429.256(4)(h), F.S., the terms "judgment" and "discretion" mean interpreting vital signs and evaluating or assessing a resident's condition. (h) All trained staff must adhere to the facility's control policy and procedures when assisting with the self-administration of medication. This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure that staff followed proper procedures for assistance with self-administration of medication for one for one out of five sampled residents (Resident #2). Findings: An observation on at 8:29AM showed medication pass for Resident #2 by Staff B. Used sanitizer, downed gloves accordingly, mentioned medications by name and what they were for, signed all Medication Observation	A 052		

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A 052	Continued From page 12 Records (MORs), but she did not observe Resident #2 swallowed the medications. In an interview on 9:47AM, Owner was advised that Staff B did not observe Resident #2 swallowed the medications during the medication pass, the Owner stated, "I was not aware of that, I need to let her know for the next time." Review of Staff B's personnel records revealed a certification for Assistance with Self-Administered Medications of 2hours dated and a certification Assistance with Self-Administration and Medication Management for 6 hours dated . Class III	A 052		
A 057 SS=D	59A-36.008(8) FAC Medication - Over The Counter (OTC) Products (8) OVER THE COUNTER (OTC) PRODUCTS. For purposes of this subsection, the term over the counter includes, but is not limited to, over the counter medications, , nutritional supplements and nutraceuticals, hereafter referred to as OTC products, that can be sold without a prescription. (a) A facility may keep a stock supply of OTC products for multiple resident use. When providing any OTC product that is kept by the facility as a stock supply to a resident, the staff member providing the medication must record the name and amount of the OTC product provided in the resident's medication observation record. All OTC products kept as a stock supply must be stored in a locked container or secure room in a central location within the facility and	A 057		

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A 057	Continued From page 13 must be labeled with the medication's name, the date of purchase, and with a notice that the medication is part of the facility's stock supply. (b) OTC products, including those prescribed by a health care provider but excluding those kept as a stock supply by the facility, must be labeled with the resident's name and the manufacturer's label with directions for use, or the health care provider's directions for use. No other labeling requirements are required. (c) Residents or their representatives may purchase OTC products from an establishment of their choice. (d) A health care provider's order is required when a nurse provides assistance with self-administration or administration of OTC products. When an order for an OTC product exists, the order must meet the requirements of paragraphs (b) and (c) of this subsection. A health care provider's order for OTC products is not required when a resident self-administers his or her medications, or when unlicensed staff provides assistance with self-administration of medications. This Statute or Rule is not met as evidenced by: Based on Observation and interview, the facility failed to ensure that all over the counter medication was properly labeled for the intended resident. The facility also failed to ensure that all over the counter medication was locked in a secure environment. Findings Included: Observation on at 6:45 a.m. showed an unlabeled container of over the counter medication (OTC) by the name of Thick-IT inside an unlocked pantry. (photographic eviedence obtained)	A 057		

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	AL11966035	A. BUILDING: _____ B. WING _____	01/16/2026

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A 057	Continued From page 14 A review of the American Speech and Language and Hearing Association database showed "Thickening agents like Thick-It are widely used to help individuals with , , (difficulty swallowing) manage liquids safely. By altering the viscosity of beverages, thickeners can reduce the risk of , , where liquid enters the . However, the use of these products is not without potential drawbacks and side effects that require careful monitoring. While Thick-It Original is a cornstarch-based product, the side effects discussed often apply generally to thickened liquids, though specific effects can vary based on the thickener type. Common Side Effects One of the most frequently reported categories of side effects relates to the ( ) system. The added starches or can alter the process, leading to several issues: " : This is a common concern associated with thickeners, , in elderly patients. While some manufacturers state their products don't bind fluids, the issue is often linked to the reduced total fluid intake that commonly accompanies the use of thickeners. If a patient drinks less because of dislike for the taste or texture, they can become , which contributes to , . " Gassiness and Bloating: The indigestible components of some thickeners can cause increased gas production and a bloated feeling. This can cause discomfort and may lead to reduced intake of fluids and food. " or Loose Stools: Conversely, some individuals may experience looser stools or , , with -added or -based thickeners. Monitoring	A 057		

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A 057	Continued From page 15 movements is important to identify any adverse changes. Mitigating Discomfort Managing side effects involves a combination of strategies. Ensuring consistent, adequate fluid intake is critical to prevent , - , . For some, a change in the type of thickener may be recommended if one specific product causes discomfort. Healthcare providers might also suggest dietary adjustments or gentle softeners, but these should be discussed with a doctor. Risk of , Perhaps the most significant and well-documented side effect of using thickeners is the increased risk of , . This is not primarily because the thickened liquid itself reduces water absorption. Instead, several behavioral and physiological factors contribute: " Poor Palatability: Many patients find thickened liquids unappealing due to altered taste and texture. The product may leave a gritty, slimy, or chalky mouthfeel, leading patients to drink less than they would with un-thickened beverages. " Early Satiety: Thickened liquids can make a person feel full faster, leading to a decreased total volume consumed over time. The feeling of a full can suppress a person's thirst cues. " Accessibility Issues: In a hospital or care facility setting, thickened liquids may be less consistently accessible to patients than thin liquids. Caregivers may also find it more time-consuming to prepare and offer thickened drinks, further limiting intake.	A 057		

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A 057	Continued From page 16 Impact on Medication Bioavailability Thickeners can interfere with how the body absorbs medication. This is a , critical issue for individuals on multiple medications or those who rely on a precise dosage. The altered viscosity can change the breakdown rate of pills and capsules, delaying or decreasing the amount of medication that reaches the bloodstream. This can result in sub-therapeutic levels of a drug, rendering it less effective. For time-release medications, this effect can be , daily. This complication is most pronounced with thicker consistencies and in patients, like the elderly, who are already on multiple medications. It is essential to consult a pharmacist or physician to determine if and how medication schedules need to be adjusted. , , Complications While the primary purpose of thickeners is to reduce the risk of , , and subsequent , , complications, their use can introduce new risks. " Increased , , Residue: Thicker liquids are heavier and may be harder for some patients to clear from their , , ( ) after swallowing. This residue can increase the risk of , , even if the primary swallow is safe. " Silent , : Some research suggests that when , does occur with thickened liquids, it may be more likely to be "silent"-meaning it doesn't trigger a protective , response. This can allow liquid to enter the , without immediate detection, increasing the risk of , , . Conclusion	A 057		

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A 057	Continued From page 17 While Thick-It and other thickeners are an essential tool for managing , , , they are not without potential side effects. These can range from common issues like , and , to more serious concerns like reduced medication effectiveness and , , complications. During an interview on at 9:57 a.m. with the Owner, she was advised of the un-locked OTC. The Owner acknowledged the finding. Class III	A 057		
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	A 152		

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A 152	Continued From page 18 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 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 observation and interview, the facility failed to ensure that all existing architectural, mechanical, electrical, and structural systems and appurtenances were maintained in good working order. Findings: An observation on at 6:39AM showed a container of tide pods in the unlocked laundry room. An observation on at 6:41AM showed no light bulbs lamps in # (Resident #1). An observation on at 6:43AM showed resident #1's bathroom commode with rusty on the shower area. (Photographic evidence obtained) In an interview on at 6:47AM, Staff B was asked about the bathroom commode with rusty on the shower area, she stated, "yes, it	A 152		

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A 152	Continued From page 19 got wet this morning and I need to replace it right away." In an interview on at 8:36AM, the Owner confirmed that the commode with rusty had been removed from the resident #1's bathroom shower area. In an interview on at 9:47AM, the Owner was asked about the container of tide pods in the unlocked laundry room, The Owner stated, "Ok, I understand, it needs to be locked at all times." Class III	A 152		