STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953670	06/17/2013
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
South Deering Retirement Home,	9730 Sw 160 Street Miami, FL 33157	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0008 - 58a-5.0181(2) Fac - Admissions - Health Assessment S-S= D
St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D
St - A - 0074 - 58a-5.019(3)(b) - Staffing Standards - Personnel File (bgs) S-S= D
St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
St - A - 0079 - 58a-5.019(4) Fac - Staffing Standards - Levels S-S= D
St - A - 0080 - 58a-5.0191(1) Fac - Training - Core & Competency Test S-S= D
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0082 - 58a-5.0191(3) Fac - Training - / S-S= D
St - A - 0083 - 58a-5.0191(4) Fac - Training - First Aid And S-S= D
St - A - 0085 - 58a-5.0191(6) Fac - Training - Nutrition & Food Service S-S= D
St - A - L241 - 58a-5.029(2) Fac - Lmh - Records S-S= D
St - A - L243 - 58a-5.0191(8) Fac - Lmh - Training S-S= D
St - A - Z815 - 408.809, 435.02(2), 435.06 - Background Screening; Prohibited Offenses S-S= C

Specific Tag Findings:

0000-Initial Comments

A State Re-Licensure Survey was conducted on in your Assisted Living Facility. South Deering Retirement Home had deficiencies found at the time of the survey.

0008-Admissions - Health Assessment 58A-5.0181(2) FAC

Based on record review and interview facility failed to maintain an accurate health assessment for 2 out of 5 residents (residents #1 and #2).

Findings include:

1-Record review for resident #2 revealed that health assessment was completed on by the primary physician and was supposed to have medications prescribed list attached, but there was not any attachment.

2-Record review for resident #1 revealed that health assessment was completed on by the primary physician and was supposed to have medications prescribed list attached, but there was not any attachment.

3-Interview with ALF manager on at 2:00 pm. confirmed that there was not a list of medications attached to the health assessments of residents #1 and #2.

Class III

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0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC

Based on demonstration, interview and record review facility failed to follow standard procedures for assistance with self administration of medications. Findings include:

1-Assistance with self administration of medication procedure was demonstrated by staff #3 on at 11:40 a.m. Staff #3 stated: " I get the medications and tell them these are the morning medications and if they ask then I tell them the name. Then I take off my gloves and wash my hands." Employee failed to Identify resident; failed to use the medication book; failed to identify the medications to the resident and failed to sign the medication observation record after assisting with self administration of medications.

2-Record review revealed that staff #3 did not have current the 2 hours continuing education in medication training; last time was completed on .

3-Interview with staff #3 on at11:40 a.m. confirmed that staff failed to follow standard procedures for assistance with self administration of medications and that staff #3 failed to take 2 hours of continuing education in medication training.

Class III

0074-Staffing Standards - Personnel File (BGS) 58A-5.019(3)(b)

Based on record review and interview facility failed to obtain the results of 2 out of 3 employee screening conducted by the agency (Staff #2 and #3).

Findings include:

Record review for staff #2 and #3 found no results of employee screening for staff #2 and #3. Staff #2 was hired and #3 on .

Manager acknowledged the findings on at 2:00 pm

Class III

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

Based on record review and interview facility failed to obtain freedom from on an annual basis for 3 out of 3 sampled residents (#1, #2, #3).

Findings include:

Record review for staff #1, #2 and #3 found no current documentation of on an annual basis. Last documentation on file for staff #1 dated , staff #2 and staff #3 .

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Manager acknowledged the findings on at 2:00 pm

Class III

0079-Staffing Standards - Levels 58A-5.019(4) FAC

Based on observation and interview facility failed to have at least one person with First Aid and trainings at all time.

Findings include:

Observation on at 10:15 a.m. revealed that staff #2 left the facility. The only staff that was in the facility was staff #3 (caregiver hired on). Record review for staff #3 revealed that her First Aid and training expired on .

Manager acknowledged the findings on at 2:00 pm

Class III

0080-Training - Core & Competency Test 58A-5.0191(1) FAC

Based on record review and interview facility's staff #1 (administrator) failed to obtain 12 hours continuing education related to Assisted living every 2 years.
Furthermore, facility's manager failed to complete the 26 hours CORE training and to obtain a passing score.

Findings include:

Record review for staff #1 (administrator hired) revealed that she lacked the 12 hours continuing education in topics related to Assisted Living.
Further record review revealed that the administrator supervises a total of 3 assisted Living Facilities and appointed staff #2 as the facility ' s manager. Record review for staff #2 manager hired , revealed that she has not yet taken the 26 hours CORE training and pass the CORE Competency test.

Manager acknowledged the findings on at 2:00 pm

Class II

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

Based on record review and interview 1out of 3 sampled staff (#2) failed to obtain minimum of 1 hour in-service training in control, including universal precautions, and facility sanitation procedures before providing personal care to residents. Furthermore 1 out of 3 sampled staff (#3) failed to obtain 3 hours of in-service training within 30 days of employment that covers the following subjects: Resident behavior and needs and providing assistance with the activities of daily living. In addition 1 out of 3 sampled staff (#2) failed to obtain a minimum of 1-hour-in-service training within 30 days of employment in safe food handling practices.

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Findings include:

1.Record review revealed that staff #2 (manager hired) failed to obtain minimum of 1 hour in-service training in control, including universal precautions, and facility sanitation procedures before providing personal care to residents
2. Record review for staff #3 (caregiver hired) found no evidence of 3 hours of in-service training within 30 days of employment that covers the following subjects: Resident behavior and needs and providing assistance with the activities of daily living.
2. Recorded review for staff #3 found no evidence of 1-hour-in-service training within 30 days of employment in safe food handling practices.

Manager acknowledged the findings on at 2:00 pm

Class III

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

Based on record review and interview facility failed to obtain and training for 2 out of 3 sampled staff (#2 and #3).

Findings include:

Record review for staff #2 (manager HIRED) and #3 (caregiver hired) found no documentation of and training.

Manager acknowledged the findings on at 2:00 pm

Class III

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

Based on observation and interview facility failed to have at least one person with First Aid and trainings at all time.

Findings include:

Observation on at 10:15 a.m. revealed that staff #2 left the facility. The only staff that was in the facility was staff #3 (caregiver hired on). Record review for staff #3 revealed that her First Aid and training expired on .

Manager acknowledged the findings on at 2:00 pm

Class III

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0085-Training - Nutrition & Food Service 58A-5.0191(6) FAC
Based on record review and interview facility ' s administrator failed to obtain a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility.

Findings include:

Record reviews for administrator revealed that she last obtain her training on . Training expired on .

Manager acknowledged the findings on at 2:00 pm.

Class III

L241-LMH - Records 58A-5.029(2) FAC

Based on record review and interview facility failed to maintain an annual community living support plan for 1 of 5 residents(resident #1).

Findings include:

1-Record review for resident #1 revealed that resident has diagnosis of . ; last Mental Health Resident's Interim Annual Community Living Support Plan was dated and expired on .

2-Interview with ALF manager on at 2:00 pm revealed that administrator did not know that last Mental Health Resident's Interim Annual Community Living Support Plan was dated ; which is more than one year ago.

Class III

L243-LMH - Training 58A-5.0191(8) FAC

Based on record review and interview 1 out of 3 facility's staff (#3) failed to obtain initial 6 hour Mental Health training offered by the Department of Children ' s and families.
Furthermore, based on record review and interview facility failed to provide evidence of 3 hours continuing education, in subjects dealing with one or more of the following topics of mental health diagnoses for 2 out of 3 sampled staff (#1 and #2).

Findings include:
1. Facility's record review revealed that staff #3 (caregiver hired) did not have 6 hours initial Mental Health Training provided by Department of Children and Families.
2. Facility's record review revealed that staff #1 (administrator hired) and staff #2 (owner/manager, hired), did not have a minimum of 3 hours of continuing education in subjects dealing with one or more of the following topics of Mental health diagnoses.

Manager acknowledged the findings on at 2:00 pm.

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Class III

Z815-Background Screening; Prohibited Offenses 408.809, 435.02(2), 435.06

Based on recorded review and interview facility failed to obtain evidence of level II FDLE for 1 out of 3 sampled staff (#2).

Findings include:

Record review for staff #2 (manager hired) found no evidence of Level II FDLE for the staff.

Manager acknowledged the findings on at 2:00 pm

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
South Deering Retirement Home,
9730 Sw 160 Street
Miami, FL 33157

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2013 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 Kristal Branton, Health Facility Evaluator Supervisor at (305) 593-3100.

Sincerely,

Kristal Branton for

Arlene Mayo-Davis
Field Office Manager

AMD:sy
Enclosure
XG90

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