STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966003	**07/31/2013**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Sara Home Care	**29100 Sw 172 Avenue Homestead, FL 33030**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0008-Admissions - Health Assessment-07/31/2013
0026-Resident Care - Social & Leisure Activities-07/31/2013
0030-Resident Care - Rights & Facility Procedures-07/31/2013
0052-Medication - Assistance With Self-Admin-07/31/2013
0078-Staffing Standards - Staff-
0079-Staffing Standards - Levels-
0093-Food Service - Dietary Standards-
0160-Records - Facility-

Revisit Repeat Tags:
0000-Initial Comments-
0152-Physical Plant - Safe Living Environ/other-58a-5.023(3) Fac
L243-Lmh - Training-58a-5.0191(8) Fac

Revisit New Tags:

Specific Tag Findings:

0000-Initial Comments

A standard biennial follow up was made at Sara Home care on 07/31/2013. The following deficiencies were found uncorrected A030, A152 and L243. No other deficiencies were found at the time of the survey.

0152-Physical Plant - Safe Living Environ/Other 58A-5.023(3) FAC

Based on observation and interview the facility failed to provide a clean, safe, decent environment to all residents.

Findings as follow:

Observation made during tour conducted on at about 1:10 p.m. documented the oven in the facility kitchen was still covered with grease, looking dirty.
In addition, refrigerator ice cube disposal area was still covered with white residue.
On at about 1:10 p.m. facility caretaker (staff #5) stated the facility oven was still covered by grease and looked dirty and the refrigerator ice disposal was still with white residue.

Class III

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

Based on record review and interview still 3 out of 5 facility's staff (#3, #4 and #5) failed to obtain, biennially, 3 hours of continuing education in topics related to Mental Health condition.

Findings include:

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Record review for staff #3, #4 and #5 found Still there was no documentation of 3 biennially hours of continuing education in trainings related to Mental Health condition as follow:

Staff #3 hired on last LMH training (6 hours) was made on
Staff #4 hired on last LMH training (6 hours) was made on
Staff # 5 hired on last LMH training (6 Hours) was made on

On at about 2:40 p.m. The facility administrator acknowledged the findings (by phone).

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Sara Home Care
29100 Sw 172 Avenue
Homestead, FL 33030

Dear Administrator:

This letter reports the findings of a revisit survey to a biennial conducted on , 2013by representative(s) of this office. Enclosed is the provider's copy of the Statement of Deficiencies (State Form 5000-3547), which references the uncorrected deficiencies and/or new deficiencies identified during the revisit.

You will not receive a copy of this report in the mail; you will only receive this faxed report. **All deficiencies shall be corrected no later than , 2013.**

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. Should you have any questions please call this office at (305) 593-3100.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD:sy
Enclosure

BBT7

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