STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967413	**07/10/2013**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
West Dade Family Care Corp	**4585 Sw 159th Court Miami, FL 33185**	
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 - 0009 - 58a-5.0181(3) Fac - Admissions - Admission Package S-S= D
St - A - 0030 - 58a-5.0182(6) Fac; 429.28 Fs - Resident Care - Rights & Facility Procedures S-S= D
St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff 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 - 0084 - 58a-5.0191(5) Fac - Training - Assis Self-Admin Meds & Med Mgmt S-S= D
St - A - 0085 - 58a-5.0191(6) Fac - Training - Nutrition & Food Service S-S= D

(If revisit, delete corrected tags/text)
Specific Tag Findings:

0000-Initial Comments

An unannounced Complaint (CCR#2013006392) Survey was conducted on , 2013. West Dade Family Care Corp ALF had the following deficiencies at time of survey

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

Based on record review and interview facility failed to complete a medical examination for 2 out of 6 sample residents (residents #2 and 5).
Findings include:

At 2:05 pm record review for resident # 5 revealed that the health assessment was not completed; lacked diagnosis, physician ' s signature and administrator signature.

At 2:15pm record review for resident # 2 revealed that health assessment was incomplete as it was not signed by the administrator of the facility.

Interview with the administrator at 2:20 PM revealed that both residents are enrolled in an HMO and that it is very hard to get ahold of the doctors to complete the health assessment. ALF administrator also revealed that administrator forgot to sign the health assessment.

Class III

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0009-Admissions - Admission Package 58A-5.0181(3) FAC

Based on record review and interview the facility failed to have an admission package for 4 out of 9 (#6, 7, 8, and 9) sampled residents.

Findings include:

Record review of resident #6's admission file contained a blank demographic sheet, contract, and form.

Record review of resident #7, 8, and 9 revealed there was no files for review. All three residents had no contact and admission package available.

Interview with ALF administrator at 3:20 p.m. stated she was waiting for her consultant to review the paperwork. The administrator and the owner acknowledge they did not have the paperwork available.

Class III

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS

Based on observations and interview the facility failed to honor resident rights for privacy for 1 out of 9 (#5) sampled residents.

Findings include:

Tour conducted on , 2013 at 8:25 a.m. found # has two beds for resident #1 and staff C. Observations found that the # personal belonging for both resident and the staff in the closets.

On at 9:00 a.m. during tour of the facility caregiver (staff C) stated that she sleeps in # with resident #1.

Interview with Staff C on , 2013 at 8:45 a.m. acknowledge she sleep in resident #5 .

Interview with the staff A the administrator on , 2012 at 9:10 a.m. stated that in # sleep residents resident #1 and resident #5. She also said that resident #5 is her aunt and that when staff C stays at night once or twice a week she uses resident #5's bed and resident #5 sleeps in the owner's .

Class III

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

Based on record review and interview, the facility failed to keep on file an updated documentation of freedom from for 4 out of 4 (#a, b, c, & d) staff members.

Findings include:

Personnel record review was conducted on for staff #A, B, C, & D did not have proof of current freedom from available. The last statement on file was dated and expired for all staff.

On , 2013 at 3:20 p.m. the administrator verified the staff did not have the updated documentation of freedom from in their files.

Class III

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

Based on personnel record review and staff interview the assisted living facility's administrator failed to participate in 12 hours of continuing education in topics related to assisted living with the last two (2) years.

Findings include:

Record review found that the facility's administrator had not completed the required 12 hours of continuing education.

Interview with the administrator on at 3:20 p.m. stated she was waiting for her consultant to review the paperwork because he went on vacation. The administrator and the owner acknowledge they did not do the update training.

Class III

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

Based on record review and interview facility administrator or managers failed to provide or arrange for the following in-service training to 3 out of 4 (#A, C,& D) direct care staff.

Findings include:

Personnel record review on revealed that sampled staff #A, C, & D who provides direct care to residents was unable to provide any documentation to prove in-service training's in the following:

Staff #A (hired) did not have documentation verifying training for 3 hours of in-service training within 30 days of employment that covers Resident behavior and needs, providing assistance with the activities of daily living and 1-hour-in-service training within 30 days of employment in safe food handling practices.

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Staff #C (hired /) did not have documentation verifying training 1-hour-in-service training within 30 days of employment in safe food handling practices.

Staff #D (hired) did not have documentation verifying training 1-hour-in-service training within 30 days of employment in safe food handling practices.

Interview with the administrator on at 3:20 p.m. stated she was waiting for her consultant to review the paperwork because he went on vacation. The administrator and the owner acknowledge they did not do the update training.

Class III

0084-Training - Assis Self-Admin Meds & Med Mgmt 58A-5.0191(5) FAC

Based on record review and interview the facility failed to ensure that unlicensed personnel who provide assistant with self administered medications obtain, annually, a minimum of 2 hours of continuing education training for 4 out of 4 (#A, B, C, & D) sampled staff.

Findings include:

Record review found that staff #A, B, C, and D contained medication training for 4 hours is dated / . There was no documentation verifying the 2 hours have been completed.

Administrator acknowledged during interview conducted on at 3:20 p.m. that staff #A, B, C, & D did not have the 2 hours update completed.

Class III

0085-Training - Nutrition & Food Service 58A-5.0191(6) FAC

Based on record review and interview the facility failed to ensure 3 out of 4(#A, C, & D) staff members responsible for the facility ' s food service and the day-to-day supervision of food service staff obtain annually, a minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility.

Findings include:

Record review of staff #A, C, & D did not have the current documentation for 2 hours continuing education for nutrition and food service training in their files.

Interview with the administrator on at 3:20 p.m. stated she was waiting for her consultant to review the paperwork because he went on vacation. The administrator and the owner acknowledge they did not do the update training.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
West Dade Family Care Corp
4585 Sw 159th Court
Miami, FL 33185

Re: CCR #2013006392

Dear Administrator:

This letter reports the findings of a state complaint 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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