STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965965	09/04/2013
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Los Abuelitos Felices, Inc	15140 Sw 183 Terrace Miami, FL 33187	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0030 - 58a-5.0182(6) Fac; 429.28 Fs - Resident Care - Rights & Facility Procedures S-S= D
St - A - 0054 - 58a-5.0185(5) Fac - Medication - Records S-S= D
St - A - 0076 - 58a-5.0186 Fac - ( ) 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 - 0084 - 58a-5.0191(5) Fac - Training - Assis Self-Admin Meds & Med Mgmt S-S= D
St - A - 0162 - 58a-5.024(3) Fac - Records - Resident S-S= D
St - A - L243 - 58a-5.0191(8) Fac - Lmh - Training S-S= D
St - A - N277 - 58a-5.031(2) Fac - Lns - Resident Care Standards S-S= D

Specific Tag Findings:

0000-Initial Comments

An Abbreviated Biennial survey was conducted on . Los Abuelitos Felices the following deficiencies were identified at time of survey.

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

Based on observation, record review and interview the facility failed to honor residents rights by having full bed rails in beds of 2 of 6 (#4 and #6) facility residents.

Findings as follow:

On at about 10:20 a.m. residents #4 and #6 were observed in bed with full bed rails up in both sides of the beds.

Record review documented the facility failed to have the full rails prescription for residents #4 and #6.

On at about 1:40 p.m. facility staff #2 (caretaker) stated residents #4 and #6 had full bed rails and also stated, believed the prescriptions for the full bed rails were in residents' records.

Class III

0054-Medication - Records 58A-5.0185(5) FAC

Based on observation, record review and interview the facility failed to have an accurate MOR for 1 of 6 (#4) facility residents.

Findings as follow:

On at about 12:05 p.m. it was observed staff #2 (caretaker) assisting resident #5 with self

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administration of medication (100 mg).

Record review revealed the medication 100 mg was prescribed 1 tab every 8 hours. (8 am, 12 noon, 8 pm). Further review revealed there was documentation of assistance with self- administration of medication for the month of 2013.

Record review documented the MOR did not specified the times of medication administration.

Review of Bingo for resident #5 documented medication 100 mg day time 8:00 a.m. was still in bingo.

On at about 12:05 p.m. caretaker (staff #2) stated did not sign MOR for resident #5 for the month of by mistake and stated the MOR did not specify the time when the medication had to be administered.

On at about 1:40 p.m. Caretaker could not explain why medication for , time 8:00 a.m. was still in bingo.

Class III

0076- ( ) 58A-5.0186 FAC

Based on record review and interview the facility failed to have proof of the 's for staff #1 (facility administrator)

Findings as follow:

Record review documented the facility failed to have proof of the 's training for staff #1 (administrator) hired on .

On at about 2:00 p.m. staff #2 (caretaker) stated 's training for staff #1 was not available due to the administrator took the employee records out of facility.

Class III

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

Based on record review and interview the facility failed to document freedom from on annual basis foor 2 of 2 facility staff (#1, #2).

Findings as follow:

Record review documented the facility administrator (staff #1 hired on) had no proof of freedom from . Record review documented staff #2 hired on last freedom from statement was dated .

On at about 2:00 p.m. staff #2 stated the administrator took papers out of facility.

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Class III.

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

Based on observation, interview and record review the facility failed to have a staffing schedule available for review, failed to have the minimun staff hours per week and failed to designate in writting an staff to be in charge of facility when the administrator was absent.

Findings as follow:
On it was observed 6 residents in facility with staff #2.

On staff #2 stated the facility had 2 employees, staff #1 (facility administrator), staff #2 (caretaker). Staff #2 stated the facility administrator was sick and could not work.This evidenced the facility had no enough staffing hours for 6 facility residents.

Record review documented the facility failed to have an staffing schedule available for review.

Record review documented the facility failed to designate in writting a person to be in charge of the facility when the administrator was absent.

Class III

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

Based on record review and interview the facility failed to have proof that the facility administrator successfully passed and approved the CORE training.

Findings as follow:

Record review documented the facility failed to have proof of facility administrator (hired on)successfully passed and approved the CORE training.
On at about 2:00 p.m. staff #2 (caretaker) stated the facility failed to have proof of facility administrator successfully passed and approved the CORE training..

Class III

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

Based on record review and interview the facility failed to have 1 of 2 (#1) facility staff trained in Reporting major incidents, Reporting adverse incidents, Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation, Resident rights in an assisted living facility, Recognizing and reporting resident , neglect, and , Resident behavior and needs and Providing assistance with the activities of daily living

Findings as follow:

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Record review documented the facility failed to have proof of:
Resident rights in an assisted living facility.
Recognizing and reporting resident , neglect, and .
Resident behavior and needs and
Providing assistance with the activities of daily living trainings
for staff #1 (facility administrator)

On at about 2:00 p.m. facility caretaker (staff #2) stated trainings
Resident rights in an assisted living facility.
Recognizing and reporting resident , neglect, and .
Resident behavior and needs and
Providing assistance with the activities of daily living
for staff #1, were not available due to the administrator took it out of facility.

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 have proof of the assistance with self administration of medications training for staff #1 (facility administrator)

Findings as follow:

Record review documented the facility failed to have proof of the assistance with self administration of medications training for staff #1 (administrator) hired on .
On at about 2:00 p.m. staff #2 (caretaker) stated proof of the assistance with self administration of medications training for staff #1 was not available due to the administrator took the employee records out of facility.

Class III

0162-Records - Resident 58A-5.024(3) FAC

Based on observation, record review and interview the facility failed to have orders for therapeutic diets for 2 of 6 (#4 and #6) facility residents.
Based on record review and interview the facility failed to have weight records for 1 of 6 (#4) facility residents who needed assistance with the activities of daily living.

Findings as follow:

On at about 12:15 p.m. it was observed caretaker (staff #2) assisting residents #4 and #6 with pureed lunch.
Record review documented the facility failed to have puree diet order for residents #4 and #6.
On at about 12:20 p.m. caretaker (staff #2) stated residents #4 and #6 always ate pureed food.

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Record review documented the facility failed to have the weight recorded (no weights recorded) every 6 months for resident #4 (hospice resident)
On at about 1:40 p.m. staff #2 stated the facility failed to have the weight recorded for resident #4.

Class III

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

Based on record review and interview the facility failed to have 2 of 2 staff trained in working with limited mental health residents as required by law.

Findings as follow:

Record review documented the facility had the LMH component in its license.

Record review documented the facility failed to have proof of the LMH training continuing education for staff #1 (facility administrator) hired on and the LMH training (6 hours) for staff #2 hired on .

On at about 2:00 p.m. staff #2 stated trainings were not available due to administrator took records out of facility.

Class III

N277-LNS - Resident Care Standards 58A-5.031(2) FAC

Based on record review and interview the facility failed to have a contract and credentials of a registered nurse.

Findings as follow:

Record review documented the facility had the Limited Nursing services component in the License.

Record review documented the facility had an incomplete contract with a nurse with no date of contract. The facility also failed to have a nurse with updated credentials (Rn expiration date). The facility failed to document freedom from for the nurse.

On at about 2:00 p.m. staff #2 stated nurse documents were incomplete and expired.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, , 2013

Administrator
Los Abuelitos Felices, Inc
15140 Sw 183 Terrace
Miami, FL 33187

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,

Arlene Mayo-Davis
Field Office Manager

AMD:sy
Enclosure
XG90

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