STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968366	09/24/2013
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
De Jay's Adult Care, Llc	700 Nw 65th Avenue Plantation, FL 33317	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0000 - - Initial Comments
St - A - E206 - 58a-5.030(7) Fac - Ecc - Service Plans S-S= D
St - A - E210 - 58a-5.0191(7) Fac - Ecc - Training S-S= D

Specific Tag Findings:

0000-Initial Comments

An Assisted Living Facility Extended Congregate Care (ECC) monitoring visit survey was conducted on . The De Jay's Adult Care, had licensure deficiencies found at the time of the visit.

E206-ECC - Service Plans 58A-5.030(7) FAC
Based on record review and interview, the facility failed to develop an extended congregate care (ECC) service plan, for 1 out of 1 sampled resident (Resident #1).

The findings include:

Review of Resident #1's record revealed a health assessment dated with diagnoses including recurrent and and needed help with all of her activities of daily living (ADLs). Review of the ECC nursing assessments dated on indicated that the resident had increased and needed reorientation. On and the resident did not have any changes in condition. Further review of the resident record indicated that she did not have an ECC service plan in place.

During an interview with the Administrator on at 1:50 PM, she stated that Resident #1 was a current ECC resident receiving total care with her ADLs but she had not developed an initial ECC service plan to address the specific needs of the resident.

Class III

E210-ECC - Training 58A-5.0191(7) FAC
Based on record review and interview, the facility failed to ensure the extended congregate care (ECC) supervisor completed an initial 4-hour continuing education training in ECC services .

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The findings include:

Review of the ECC supervisor's employee record indicated that she received an [redacted] 4-hour training course on [redacted]. Further review of the ECC supervisor's record indicated that she was hired on [redacted] and she did not receive an initial 4-hour ECC training course.

In an interview with the Administrator on [redacted] at 1:00 PM, she stated that she does not have the ECC supervisor's initial 4 hour ECC training certificate.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
De Jay's Adult Care, LLC
700 NW 65th Avenue
Plantation, FL 33317

RE: Extended Congregate Care Monitoring

Dear Administrator:

This letter reports the findings of a ECC monitoring survey that was conducted on , 2013 by a representative from 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 (30) days** of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after , **2013** 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 representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD/dso
Enclosure
XG90

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
http://ahca.myflorida.com

Delray Beach Field Office
5150 Linton Boulevard, Suite 500
Delray Beach, FL 33484
Phone (561) 381-5840; Fax (561) 496-5924