STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968447	04/23/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Residencia Alf Corp	8324 Nw 195th Terr Hialeah, FL 33015	
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 - 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 - 0055 - 58a-5.0185(6) Fac - Medication - Storage And Disposal S-S= D
St - A - 0056 - 58a-5.0185(7) Fac - Medication - Labeling And Orders S-S= D
St - A - 0160 - 58a-5.024(1) Fac - Records - Facility S-S= D
St - A - 0162 - 58a-5.024(3) Fac - Records - Resident S-S= D

Specific Tag Findings:

0000-Initial Comments

A Complaint Investigation (CCR# 2014003467) was conducted on . Residencia ALF Corp had the following deficiencies at time of survey.

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

Based on record review and interview the assisted living facility failed to have a completed health assessment within 30 days of admission for 2 out of 10 (#6 and #9) sampled residents.

Findings include:

Record review revealed that resident #6 was admitted to the facility on . Record review found that the facility did not have a completed health assessment for resident #6.

Interview with the administrator and the facility's consultant on at 12:35 p.m. confirmed no health assessment in her record. The administrator said that she spoke to the doctor and told her to make the health assessment.

Closed record review found that the health assessment for resident #9 was not completed. The health assessment was left blank for activities of daily living which included and transferring.

Class III

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

Based on observations, record review, and interview the assisted living facility failed to honor resident rights. The facility failed to allow 2 out of 10 (#3 and #4) sampled residents who were married the chose to share a . The facility failed to allow residents to receive visitors from at least 9 am to 9 pm.

Findings include:

Facility tour on at 9:08 a.m. revealed that resident #3 was sharing a a male resident and resident #4 was sharing a a female resident. During the tour staff A stated that resident #3 and #4 are husband and wife.

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Interview with the administrator and the facility's consultant on at 1:00 p.m. explained that residents #3 and #4 are a couple but since resident #5's wife she placed resident #3 in his moved resident #4 to another She said it was short term because she had no other beds. She admitted another female resident into the facility and she could not share a resident #5.

Record review found that the facility's rules had an entry that stated visitation was from 9:00 a.m. to 7:00 p.m. (9 pm was crossed out).

Interview with the administrator and the facility's consultant revealed that the facility only receives visit till 7 p.m. because residents are in their beds. The administrator stated that the facility does not allow visits after 7 p.m.

Class III

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

Based on record review and interview the assisted living facility failed to have a maintained medication observation record for 3 out of 10 (#5, #9, and #10) sampled residents.

Findings include:

Record review found that resident #5 was ordered 500 milligrams (mg), 4 times a day for 10 days (40 capsules). Record review found the medication observation record for resident #5 was initialed 42 times by the facility instead of 40 times.

Record review found that residents #9 and #10 had the following medications picked up from the pharmacy on at 11:09 a.m. Isosobride 30 mg, ER 50 mg, 100 mg, 5 mg, Zenpep 25,000u capsules and 20 mg. Record review found that the facility initialed giving residents #9 and #10 the medications on at 8 a.m. Record review also found that the facility did not initial the resident #9 ' s MOR for 27 and 28.

Interview with the administrator and facility's consultant on at 12:35 p.m. The MOR was reviewed with the administrator who counted the initials and confirmed that it was 42 instead of 40. The pharmacy receipts with dates and times were shown to the administrator with the MOR and she said it was a mistake and she was sorry.

Class III

0055-Medication - Storage and Disposal 58A-5.0185(6) FAC

Based on observations and interview the assisted living facility failed to keep centrally stored medications locked up at all times.

Findings include:

Facility tour on at 9:15 a.m. found that office where resident medications were stored was found

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unlocked and open. Observations found the two cabinets that stored the medications were also unlocked.

Interview with the administrator and facility's consultant on at 1:08 p.m. Administrator said that her office door has a lock but explained that it must be locked up at all times. The administrator was advised that during the tour the office door was found unlocked and open.

Class III

0056-Medication - Labeling and Orders 58A-5.0185(7) FAC

Based on observations, record review, and interview the assisted living facility failed to ensure that prescribed and over the counter medications for 1 out of 10 (#1) sampled residents were properly labeled.

Findings include:

Medication review on at 10:29 a.m. found that There were two of the resident #1's medications that had the label ripped off. The medications were and . There was also an over the counter medication for that did not have resident #1's name written on it.

Record review found that resident #1's medication observation record had and written on the record and was initialed daily that it was given to the resident.

Interview with the administrator and the facility's consultant on at 12:35 p.m. The administrator said that she received the medications from the family. She called the doctor yesterday, and he confirmed the medications for resident #1. He put in order to the pharmacy and will be ready today. She said that the resident lived alone and she did not keep medications updated. She confirmed that did not have name written on it. She do 't put the name on the label but she needs to check with the doctor. MOR was shown and she confirmed that medication not labeled and it is signed in MOR.

Class III

0160-Records - Facility 58A-5.024(1) FAC

Based on record review and interview the assisted living facility failed to have an up to date admission and discharge log.

Findings include:

Record review found that the facility did not have an up to date admission and discharge log. Record review found the following:
1. Resident #1 was not listed on the log admitted on
2. Resident #2 was not listed on the log admitted on
3. Resident #7 was admitted but there was no discharge date
4. Resident #8 was admitted but there was no discharge date

Interview with the administrator and facility's consultant on at 12:50 p.m. confirmed that the admission

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and discharge log was not up to date but the administrator said she fixed it.

Class III

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

Based on record review and interview the assisted living facility failed to record weights at admission and have doctor's orders for 1 out of 10 (#1) sampled residents.

Findings include:

Record review found that resident #1 was admitted to the facility on . Record review found that resident #1 did not have weights recorded at admission and the facility also did not have doctor's orders in the record.

Interview with the administrator and facility's consultant on at 12:35 p.m. revealed that she spoke to the doctor yesterday and he ordered medications for resident #1. The administrator also confirmed that the facility did not have the weights written down for resident #1.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Residencia Alf Corp
8324 Nw 195th Terr
Hialeah, FL 33015

Re: CCR # 2014003467

Dear Administrator:

This letter reports the findings of a state complaint survey that was conducted on , 2014 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

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

Miami Field Office
8333 N.W. 53rd Street, Suite 300
Miami, FL 33166
Phone (305) 593-3100; Fax (305) 593-3121