STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910975	04/24/2014
NAME OF PROVIDER OR SUPPLIER Living Of Little Havana, Inc	STREET ADDRESS, CITY, STATE, ZIP CODE 820 Sw 20th Avenue Miami, FL 33135	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)

List of Tags Cited:
St - A - 0152 - 58a-5.023(3) Fac - Physical Plant - Safe Living Environ/other S-S= D

Specific Tag Findings:

0000-Initial Comments

A unannounced complaint inspection (CCR#2014003694) was conducted on . The Living of Little Havana assisted living facility did have deficiencies at the time of this visit.

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

Based on observation,interview and document review, the facility failed to provide a safe living environment, free of hazards and did not ensure all the existing structural and mechanical systems are maintained in good working order because the entrance sidewalk, elevator, wall, air conditioning vents were in disrepair.

The findings are:

In an observation on at 10:30am, the elevator located on the east side of the facility had its doors shut at all of its landings (floors 1, 2 and 3) and it did not present to be in working order when pressing its buttons because the doors would not open or create any mechanical noise to indicate any function.

In an interview with the facility owner on at 10:55am, he stated that the elevator is currently not operational, it has been not operational for about 3 months and that the residents used the elevator as an amusement park ride when it is operational. He stated that the elevator needs " a cylinder and a fuse inside the motor " and that he has not promoted its repair because the residents will continue to misuse the elevator.

Review of the elevator contractor repair tickets dated on and indicated that the facility elevator needed an " spirator " and was not in working order. Further review of the elevator contractor repair tickets indicated that the facility did not have any repair tickets dated after .

Review of the City of Miami certificate of elevator operation indicated that the facility ' s elevator was approved for operation until . Further review of the elevator permits or certificates indicated that the facility did not have any certification for its proper operation after .

In an observation on at 11:10am, the wall located on the east side of the 3rd floor common hallway had a hole that measured approximately 6 " x 4 " that exposed the interior of the wall, as photographed. In an observation on at 11:20am, the facility entrance ' s concrete sidewalk located on the east side of the facility, had a cut approximately 20 " in width, which was filled with hard packed dirt. The cut concrete edges in the entrance sidewalk protruded approximately 2-3 " above the hard packed dirt covering this break in the sidewalk, as photographed. In an observation on at 12:00pm in the dining , the supply air conditioning vents presented to be soiled with black and had signs of moisture damage, as photographed.

In an interview with the owner on at 12:50pm, he stated that the entrance sidewalk was cut on or about

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2011 for a sewer project that the city performed, that he brought it up to the landlord ' s attention and that the facility has not followed up on the actual sidewalk repair. He stated that the staff has also attempted to clean the air conditioning vents in the dining , but they get dirty very quickly from the doors being constantly open and condensation builds naturally.

In an interview with the City of Miami elevator inspector on at 1:00pm, he stated that he did not show a current elevator operation permit for the facility, that he will follow-up with an onsite inspection by a city inspector and will contact the Agency upon official determination of the facility ' s elevator status. In an interview with the city inspector on at 9:05am, he stated that a city inspector responded to the facility on and found that the facility ' s elevator was not operational and had not been certified for operation since 2010. He stated that the facility was cited for not having the elevator in proper working order and it required the facility to bring its elevator up to code and repair it so it may qualify for certification.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Living Of Little Havana, Inc
820 Sw 20th Avenue
Miami, FL 33135

Dear Administrator:

Re: CCR #2014003694

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,

Kristal Branton for

Arlene Mayo-Davis
Field Office Manager

AMD:sy
Enclosure
XG90

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