

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11968299	(X3) DATE SURVEY COMPLETED 06/03/2014
NAME OF PROVIDER OR SUPPLIER Villa Estrella Alf Inc	STREET ADDRESS, CITY, STATE, ZIP CODE 15580 Sw 146th Miami, FL 33177	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D
 St - A - 0055 - 58a-5.0185(6) Fac - Medication - Storage And Disposal S-S= D
 St - A - 0084 - 58a-5.0191(5) Fac - Training - Assis Self-Admin Meds & Med Mgmt S-S= D
 St - A - 0160 - 58a-5.024(1) Fac - Records - Facility S-S= D
 St - A - 0161 - 58a-5.024(2) Fac - Records - Staff 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 - Z815 - 408.809, 435.02(2), 435.06 - Background Screening; Prohibited Offenses S-S= C

Specific Tag Findings:

0000-Initial Comments

A Standard Biennial survey was conducted on . Villa Estrella Assisted Living Facility had the following deficiencies at the time of the visit:

0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC

Based on observation, record review and interview the facility failed to follow the correct procedure when assisting 1 out of 4 sampled residents with self administration of medications.

Findings as follow:

Observation on , 2014 at approximately 10:00 a.m. staff #2 (caretaker) did not follow the correct procedure when assisting resident #1 with self administration of medications

At about 8:30 a.m. the medication cabinet was observed open.

At about 8:30 a.m. observed Medications were poured into a cup and placed in a tray over the kitchen counter together with resident's #1 breakfast. Medications were observed unattended while staff #3 was doing other activities

At about 10:00 a.m. Resident #1 was sleeping and several attempts to make resident wake up her by staff , for medication administration, were unsuccessful.

Record review documented resident was prescribed medications at 8:00 a.m. and medications were given to resident at about 10:15 a.m.

On at about 11:00 a.m. the facility owner confirmed the staff member failed to follow the correct procedure when assisting resident #1 with self administration of medications by having medications poured and left unattended over the kitchen counter and by not following the Doctor's prescription of giving medications to client at 8 am.

Class III

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

Based on observation and interview the facility failed to have medications properly storage.

Findings as follow:

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On at about 8:30 a.m. the facility medication cabinet, placed in the kitchen was observed with the door open. The door had a lock and a key hanging from it. The medication cabinet was observed unattended.

On at about 8:30 a.m. caretaker (staff #3) confirmed the medication cabinet was unlocked.

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 2 of 4 (#1 and #4) trained in assisting residents with self administration of medications.

Findings as follow:

Record review revealed the facility failed to ensure staff #1 (hired) received continuing education in assisting with self administration of medications as well as staff #4 (hired) receive the initial training in assisting with self administration of medications (4 hours)

Interview on at about 11:00 a.m. the facility owner confirmed staff #1 did not receive continuing education and staff #4 trained in assisting with self administration of medications.

Class III

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

Based on observation, record review and interview the facility failed to maintain an up to date admission and discharge log.

Findings as follow:

On there were observed 4 (#1, #2, #3 and #4) residents in facility.

Record review revealed the facility failed to have resident #2 (admitted 15 days ago) listed on the Admission and Discharge log.

On at about 11:00 a.m. the facility administrator stated the facility failed to include resident #2 on the admission and discharge log.

Class III

0161-Records - Staff 58A-5.024(2) FAC

Based on record review and interview the facility failed to have an employment application for 2 of 4 (#2 and #3) facility staff.

Findings as follow:

Record review documented the facility failed to have an employment application for staff #2 (hired about a month

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ago) and staff #3 (hired about 15 days ago).

On at about 11:00 a.m. the facility owner confirmed the staff did not have employment applications for staff #2 and #3.

Class III

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

Based on record review and interview the facility failed to have 1 of 4 (#2) facility residents' records available for review.

Findings as follow:

Record review revealed the facility did not have a record for resident #2 (admitted about 15 days ago) available for review.

On at about 10:00 a.m. staff #3 (caretaker) confirmed the facility had no record for resident 's #2 available for review due to resident was admitted about 15 days ago.

Class III

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

Based on record review and interview the facility failed to have 1 of 4 (#1) facility staff trained in working with Limited Mental health residents continuing education..

Findings as follow:

Record review revealedd the facility had the Limited mental health component in license.

Record review documented the facility failed to have staff #1 (hired on) trained in working with Limited Mental Health residents.

On at about 11:00 a.m. the facility owner confirmed staff #1 (administrator) did not have training in working with limited mental health residents.

Class III

Z815-Background Screening; Prohibited Offenses 408.809, 435.02(2), 435.06

Based on observation, record review and interview the facility failed to perform the level II background screening for 1 of 4 (#3) facility staff.

Findings as follow:

On at about 8:30 a.m. it was observed staff #3 (hired about 15 days ago) going out from the bath with a resident. Staff #3 stated she was assisting resident with the bath. The staff member was observed assisting

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resident with transferring from the bath to i. At about 8:50 a.m. staff #3 was observed cleaning residents

Record review documented the facility had no the background screening level II for staff #3.

Further review of the agency's background screening Webster found no matching record.

On at about 11:00 a.m. the facility owner confirmed the facility failed to perform the level II background screening to staff #3 due to only assisting with residents and house cleaning.



RICK SCOTT
GOVERNOR
ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Villa Estrella Alf Inc
15580 Sw 146th
Miami, FL 33177

Dear Administrator:

This letter reports the findings of a state licensure 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:kb
Enclosure

XG90

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