STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968296	06/02/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Tikas Alf Inc	14822 Garden Dr Miami, FL 33168	
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 - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D

Specific Tag Findings:

0000-Initial Comments

An Standard Biennial Survey was conducted on . Tikas ALF Inc had deficiencies at time of survey.

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

Based on record review,observation and interview facility failed to have and accurate AHCA Form 1823 (health assessment) for 1 out of 5 sampled residents.

Findings includes:

Record review of resident #1 health assessment (dated)] the examining physician assessed the resident as needed total care with all activities of daily living ((ambulation, bathing, dressing, eating, self-care, toileting and transferring.

Multiple observation on during the entire, resident #1 was observed sitting in the front common area watching TV and talking with the staff members,The resident appears to be very functional, though he uses a wheelchair, the resident can get up with he assistance of staff to use the rest . The resident was observed feeding himself during lunch time. When interviewed, the resident was very clear and able the questions without any problems. When he wanted to go back to his wheeled himself without the assistance of the staff.

Interview with the administrator on at 4:00 pm she confirmed the the assessment of documented on the resident's health assessment was inaccurate and did not know why the doctor labeled the resident as total care.

Class III

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

Record review and interview facility failed to have 1 out of the 4 sampled employees facility failed to have their training document training's in their files.

Findings includes:

Record review revealed that employee A. (Caretaker started on -) she did not have documentation of being trained in Activities of Daily Living and Behavioral Needs, Resident Rights and Recognizing & Reporting , Neglect and .

Interview with the administrator on at 3:00 pm she confirmed the findings in regards to employee did not have documentation of being trained in Activities of Daily Living and Behavioral Needs, Resident Rights and Recognizing & Reporting , Neglect and

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Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Tikas Alf Inc
14822 Garden Dr
Miami, FL 33168

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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