STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967507	10/15/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Belen Sweet Home Alf Ii Inc	11825 Sw 206 Street Miami, FL 33177	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0082 - 58a-5.0191(3) Fac - Training - / S-S= D
St - A - 0084 - 58a-5.0191(5) Fac - Training - Assis Self-Admin Meds & Med Mgmt S-S= D
St - A - 0090 - 58a-5.0191(11) Fac - Training - S-S= D
St - A - 0092 - 58a-5.020(1) Fac - Food Service - General Responsibilities S-S= D
St - A - 0161 - 58a-5.024(2) Fac - Records - Staff S-S= D
St - A - L241 - 58a-5.029(2) Fac - Lmh - Records 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

An Abbreviated Biennial survey was made on . Belen Sweet Home ALF had the following deficiencies at the time of visit.

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

Based on record review and interview the facility failed to have 1 of 4 (#4) facility staff trained in the required in-service training.

Findings as follow:

Record review documented staff #4 (hired on) was listed on the facility posted schedule.
Record review documented the facility failed to have staff #4 trained in the following areas:
Reporting major and adverse incidents.
Facility emergency procedures.
Resident rights in an assisted living facility.
Recognizing and reporting resident , neglect, and .
Resident behavior and needs.
Providing assistance with the activities of daily living.
control.

On at 12:00 noon the facility administrator confirmed the facility did not have staff #4's documentation of above mentioned training in facility, adding that the documentation of training were in another facility.

Class III

0082-Training - / 58A-5.0191(3) FAC

Based on record review and interview the facility failed to have 1 of 4 (#4) facility staff trained in and topics.

Findings as follow:

Record review showed staff #4 (hired on) was listed on the facility's posted schedule. Further review

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showed the facility failed to have staff #4 trained in and topics (one time education course).

On at 12:00 noon the facility administrator confirmed the facility did not have staff #4's documentation of being trained in and , adding that the documentation of training were in another facility.

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 the assistance with self administration of medications training for 1 of 4 (#4) facility staff.

Findings as follow:

Record review documented the facility failed to have documentation of the assistance with self administration of medication training for staff #4, hired on .

On at 12:00 noon, the facility administrator stated, the facility failed to have staff #4's medication training documentation in facility, adding that the documentation is in another facility.

Class III

0090-Training - 58A-5.0191(11) FAC

Based on record review and interview the facility failed to have 1 of 4 (#4) facility staff trained in .

Findings as follow:

Record review documented staff #4 was in facility schedule posted.
Record review documented the facility failed to have staff #4 (hired on) trained in .

On at 12:00 noon the facility administrator stated the facility failed to have staff #4 training documentation in facility, adding that the documentation is another facility.

Class III

0092-Food Service - General Responsibilities 58A-5.020(1) FAC

Based on record review and interview the facility failed to have 1 of 4 (#4) facility staff, in charge of food services, trained, in nutrition and food service.

Findings as follow:

Record review documented staff #4 was in facility schedule posted.
Record review documented the facility failed to have staff #4 (hired on) trained in Nutrition and Food Service.

On at 12:00 noon the facility administrator stated the facility failed to have staff #4, who is in charge of

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food service, documentation in Nutrition and food service. adding the documentation of the training is in another facility.

Class III

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

Based on record review and interview the facility failed to have copies of all licenses and certifications for 1 of 4 (#4) facility staff.

Findings as follow:

Record review documented staff #4 was in the facility schedule.
Record review documented the facility failed to have the following certifications of staff #4 (hired on), available for review:
Employment application.
Freedom from communicable statement.

On at 12:00 noon the facility administrator stated had no the employment application, freedom from communicable statement and proof of level 2 background screening available for review in facility, and addedd that the documentation was in another ALF.

Class III

L241-LMH - Records 58A-5.029(2) FAC

Based on record review and interview the facility failed to have an annual community support plan and agreement for 2 of 2 (#1 and #3) facility Limited Mental Health residents.

Findings as follow:

Record review documented resident #1 (admitted on) and resident #3 (admitted on) had a Diagnoses of .

Record review documented the facility failed to have a mental health assessment, annual community support plan and agreement for residents #1 and #3, available for review.

On at 11:50 a.m. the facility administrator stated failed to have the mental health assessment, annual community support plan and agreement for mental health residents #1 and #3.

Class III

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

Based on record review and interview the facility failed to have 1 of 4 (staff #3) facility staff trained in working with limited mental health residents.

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Findings as follow:

Record review showed the facility holds an standard license with Limited Mental Health component. Further review documented the facility failed to have staff #3 (hired on) trained in working with Limited Mental Health residents.

On at 12:00 PM the facility administrator stated staff #3 has not received the Limited Mental Health training.

Class III

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

Based on record review and interview the facility failed to have a level 2 background screening for 1 of 4 (#4) facility staff.

Findings as follow:

Record review documented the facility failed to have the mbackground screening level 2 for facility staff #4 (hired on).

On at 12:00 PM the facility administrator confirmed the facility failed to have a background screening for staff #4.

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Belen Sweet Home Alf Ii Inc
11825 Sw 206 Street
Miami, FL 33177

RE: CCR #

Dear Administrator:

This letter reports the findings of an abbreviated biennial survey that was conducted on 15, 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, RN
Field Office Manager

AMD:kb
Enclosure

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