

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11967457	(X3) DATE SURVEY COMPLETED 12/02/2014
NAME OF PROVIDER OR SUPPLIER Flamingo Care Llc	STREET ADDRESS, CITY, STATE, ZIP CODE 1270 Ne 174 Street North Miami Beach, FL 33162	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0077 - 58a-5.019(1) Fac - Staffing Standards - Administrators S-S= D
 St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
 St - A - 0082 - 58a-5.019(3) Fac - Training - / S-S= D
 St - A - 0083 - 58a-5.019(4) Fac - Training - First Aid And S-S= D
 St - A - 0084 - 58a-5.019(5) Fac - Training - Assis Self-Admin Meds & Med Mgmt S-S= D
 St - A - 0085 - 58a-5.019(6) Fac - Training - Nutrition & Food Service S-S= D
 St - A - 0090 - 58a-5.019(11) Fac - Training - S-S= D
 St - A - 0160 - 58a-5.024(1) Fac - Records - Facility 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 , 2014. Flamingo Care LLC had the following deficiencies at time of the survey.

0077-Staffing Standards - Administrators 58A-5.019(1) FAC

Based on record review and interview the facility failed to ensure the administrator have a high school diploma 1 out of 5(#A) sampled staff.

Findings include:

Agency pre-survey done on of facilityhealthfinder.gov indicates staff A as the administrator.

Record review showed staff A (administrator) had no proof of high school diploma in her personnel file. Record review found a staff had the Assisted Living Facility (ALF) CORE training on and pass the CORE test.

Interview with the administrator on at 3:10 PM stated she has a high school diploma and could not find it.

Class III

0078-Staffing Standards - Staff 58A-5.019(2) FAC

Based on record review and interview the facility failed to ensure that 1 out of 5 sampled staff (#C) failed to submit a written statement from a health care provider documenting communicable and 4 out of 5 sampled staff (#A, B, C, and D) have a current annual basis.

Findings include:

Record review found that staff A, B, C, and D did not have documentation of a negative on an annual basis

Staff A (hired) statement was dated
 Staff B (hired) statement was dated
 Staff C (hired) did not have documentation of communicable including statement,
 Staff D (hired) statement was dated

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Interview with the administrator on documentation of a negative at 3:30 PM confirmed that staff members sampled did not statement for her staff.

Class III

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

Based on record review and interview, facility failed to ensure 1 out 5 (#E) staff sampled have / training.

Findings includes:

Record review showed that staff E (hired) did not have documentation of being trained in / .

Interview with administrator on at 3:30 PM acknowledge staff E did the training but was unable to provide proof it was completed.

Class III

0083-Training - First Aid and 58A-5.0191(4) FAC

Based on record review and interview the facility failed to ensure 1 out of 5(#E) sampled staff have the First Aid and trainings.

Findings include:

Review of staff schedule shows staff E works from 8 PM to 8 AM on Monday through Friday. Record review of staff file for staff E showed there is no documentation available for review of current First Aid and trainings.

Interviewed with administrator on at 3:30 PM acknowledge staff E did the training but was unable to provide proof it was completed.

Class III

0084-Training - Assis Self-Admin Meds & Med Mgmt 58A-5.0191(5) FAC

Based record review, and interview the facility failed to ensure 1 out of 5 (#E) sampled staff have successfully completed the initial 4 hour training on providing assistance with self-administered medications.

Findings include:

Record review showed that medication observation records (MORs) were initialed by staff B, C, D and E.

Record review conducted on revealed staff E(hired) file contained documentation of 2 hours medication training dated . Staff E contained no documentation of 4 hours of assistance with self-administration of medication training at the facility.

Interview with the administrator on at 3:30 PM acknowledge staff E did the training but was unable to

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provide proof it was completed.

Class III

0085 Training - Nutrition & Food Service 58A-5.0191(6) FAC

Based on record review and interview the facility failed to ensure 1 out of 5 (#E) sampled staff have minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility.

Findings include:

Record record review of staff files staff E (hired) did not have documentation of receiving the 2 hours in nutrition and food service training.

Interview with the administrator on at 3:30 PM acknowledge staff E did the training but was unable to provide proof it was completed.

Class III

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

Based on record review and interview the facility failed to ensure that 1 out of 5 (staff E) sampled staff had training in . ().

Findings include:

Record review revealed that sampled staff E (hired) did not have the training.

Interview with the administrator on at 3:30 PM acknowledge staff E did the training but was unable to provide proof it was completed.

Class III

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

Based on record review and interview the administrator failed conduct and documented facility's resident elopement response drills.

Finding includes:

Record review of facility files showed documented elopement drills done on , / , and . There were no other drills done.

Interview with administrator on at 4:00 PM confirmed the drills were not done.

Class III

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

Based on record review, and interview the facility failed to ensure that 1 out of 5 (#E) sampled staff had documentation of compliance with level 2 background screening.

Findings include:

Record review on revealed that staff #E (hired) did not have documentation of level background screening. A Background Screening search was completed on at 2:30 PM and showed sampled staff E "Agency Review Required"

Interview with administrator on at 3:10 PM confirmed the staff did not have a clear background screening.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Flamingo Care LLC
1270 Ne 174 Street
North Miami Beach, FL 33162

Dear Administrator:

This letter reports the findings of a standard biennial survey that was conducted on 2, 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 1/ 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

XG90

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