STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966853	01/06/2015
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Jorge's Home Inc	15172 Sw 13th Terrace Miami, FL 33194	
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 - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D
St - A - 0076 - 58a-5.0186 Fac - ( ) S-S= D
St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
St - A - 0082 - 58a-5.0191(3) Fac - Training - . S-S= D
St - A - 0085 - 58a-5.0191(6) Fac - Training - Nutrition & Food Service 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

Specific Tag Findings:

0000-Initial Comments

A Standard Biennial survey was conducted on . Jorge's Home had the following deficiencies at time of survey

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

Based on record review and interview, the facility failed to ensure one out six residents to have an Health Assessment in her chart at the time of the survey.

Findings includes:

Record review revealed that resident #6 (admitted on) she did not an a completed Health Assessment in her chart within 30 days of admission. The only health assessment found in the resident's chart stated she has with Severe Scoliosis, , III, Malig of other unspecific oral Cavity and with manifestations, type II or unspecific, not uncontrolled, Chronic Kidney , W unspecified, Unspecific Essential . This information was taken from a hospital record, dated and documented on the facility's health aseesement by the administrator. There was no documentation verifying that the resident physician has conducted a face to face assesment.

Interview with the administrator on at 3 :00 pm, he confirmed the findings in regards that resident #6 did not an health assessment since being admitted to their facility on

Class III

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

Based on record review and interview, the facility failed to have two out four sampled employees trained in the area of Assistance with Self-Administration of Medication.

Findings includes:

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Record review revealed that employee B. (caretaker) and employee D. (caretaker) did not have documentation of being trained in Assistance with Self-Administration in their files. Employee C has been working at the facility since and employee D has been working at the facility since .

Interviee with the administrator on at 3: 00 pm, he confirmed the findings in regards that both employees caretakers C and D did not have training documentation in their files at the time of the survey.

Class III

0076- ( ) 58A-5.0186 FAC

Based on record review and interview facility failed to have one out of four sampled employees to have training in the areas for ( ) in her file at the time of the survey.

Findings includes:

Record review revealed that employee D. (caretaker started on) did not have her training in the areas for in her file at the time of the survey.

Interview with the administrator on at 3:00 pm, he confirmed the findings in regards to employee D did not have any training in the areas for at the time of the survey.

Class III

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

Based on record review and interview, the facility failed to ensure three out of four sampled employees have documentation of a negative examination on an annual basis and one out of four sampled employees have documentation of freedom from communicable within 30 days of hire.

Findings includes:

Record review revealed that employees ,A, B, and C. did not have documentation of having a negative examination. . Employee A. (administrator/ owner started on) last statement was , employee B. (caretaker/co-owner started on) last tuberculosi statement was dated) ployee C (caretaker started on) last statement was .Further review employee D (caretaker started on) did not have any documentating freedom from communicable including .

Interview with the administrator on at 3:00 pm, he confirmed the findings in regards to all 4 sampled employees did not have their up to date pnysical examinations in their files at the time of the survey.

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Class III

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

Based on record review and interview facility failed to have 1 out of 4 sampled employees to have training in the areas for / in her file at the time of the survey.

Findings includes:

Record review revealed that employee D (caretaker started on) did not have her training in the areas for / in her file at the time of the survey.

Interview with the administrator on at 3:00 pm, he confirmed the findings in regards to employee D (caretaker) did not have any training in the areas for / at the time of the survey.

Class III

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

Based on record review and interview facility failed to have one out of four sampled employees to have training in the areas for Nutrition and Safe Food Handling in her file at the time of the survey.

Findings includes:

Record review revealed that employee D (caretaker started on and did not have her training in the areas for Nutrition and Safe Food Handling in her file at the time of the survey.

Interveiw with the administrator on at 3:00 pm, he confirmed the findings in regards to employee D caretaker did not have any training in the areas for Nutrition and Safe Food Handling at the time of the survey.

Class III

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

Based on record review and interview facility failed to have one out six residents did not have a POA in their chart at the time of the survey

Findings includes:

Record review revealed that resident #2 (admitted on) mother has signed his contract and did not have a POA (Power of Attorney) in the residents chart giving her permission to sign any documents in the residents chart at the time of his admission to the facility.

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Interview with the administrator/owner on at 3:00 pm, he confirmed the findings in regards that resident #2's mother has been signing his documentation and contract without having a POA (Power of Attorney) in his chart.

Class III

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

Based on record review and interview facility failed to have one out ofsix4 sampled employees to have training in the areas for Limited Mental Health (LMH) in her file at the time of the survey.

Findings includes:

Record review revealed that employee D. (caretaker started on) did not have her training in the areas for LMH in her file at the time of the survey.

Intevrview with the administrator on at 3:00 pm, he confirmed the findings in regards to employee D caretaker did not have any training in the areas for LMH at the time of the survey.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Jorge's Home Inc
15172 Sw 13th Terrace
Miami, FL 33194

Dear Administrator:

This letter reports the findings of a standard biennial survey that was conducted on 2015 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
XG90

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