STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966807	02/18/2015
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Star Of Mary Adult Center	6425 Sw 93 Place Miami, FL 33173	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0054 - 58a-5.0185(5) Fac - Medication - Records S-S= D
St - A - 0077 - 429.176 Fs; 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 - 0080 - 429.52(1-2) Fs; 58a-5.0191(1) Fac - Training - Core & Competency Test S-S= D
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service 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 - L243 - 429.075(1) Fs; 58a-5.0191(8) Fac - Lmh - Training S-S= D

Specific Tag Findings:

0000-Initial Comments

A Standard Biennial survey was conducted on . Star of Mary Adult Center had the following deficiencies at the time of the survey:

0054-Medication - Records 58A-5.0185(5) FAC

Based on observation, record review, and interview the facility initialed the medication observation record (MOR) for 1 of 6 (#3) facility residents who self administered medication and did not receive assistance from the facility.

Findings as follow:

On at 8:45 a.m. during facility tour observed Resident #3 self administering an aerosol in the a

Record review showed the MOR documented the resident was ordered a 0.02 solution via 3 times a day. Record review showed Staff B signed the medication observation record (MOR) for Resident #3 on / till

On at 8:45 a.m. Resident #3 stated I always self administer the aerosol, adding that she is capable of doing so.

On at 9:10 a.m. Staff B stated, Resident #3 self administer the aerosol adding that she signed the MOR by mistake.

Class III

0077-Staffing Standards - Administrators 429.176 FS; 58A-5.019(1) FAC

Based on record review and interview the facility failed to have a manager appointed.

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Findings as follow:

Record review showed Staff A is the administrator of two facilities. Record review showed the facility failed to appoint a manager in writing.

On //2015 at 12:40 p.m. Staff B stated the facility's administrator was out of country for a family mat... ...id added the facility has no manager.

Class III

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

Based on record review and interview the facility failed evidence of a negative examination on an annual basis for 2 of 3 (A and B) facility staff.

Findings as follow:

Record review showed the facility failed to have evidence of a negative examination on annual basis for Staff A and Staff B. Record review showed the last freedom from communicable including for Staff A and Staff B were dated .

On at noon Staff B acknowledged the facility failed to have an up-to-date exa...mination for Staff A and B.

Class III

0080-Training - Core & Competency Test 429.52(1-2) FS; 58A-5.0191(1) FAC

Based on record review and interview the facility failed to ensure the administrator received 12 hours of continuing education every two years.

Findings as follow:

Record review showed the facility failed to have documentation of the 12 hours continuing education in topics related to assisted living every two years.

On at noon Staff B stated the facility had no proof of the continuing education training for the ...inistrator.

Class III

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

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SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Based on observation, record review and interview the facility failed to have 1 of 3 (B) facility staff trained in-services within 30 days of employment.

Findings as follow:

On at 9:50 a.m. observed Staff B (hired on) assisting facility residents with the activities of daily living.

Record review showed the facility failed to have documentation of the following training for Staff B within 30 days of employment:
Reporting major incidents
Reporting adverse incidents
Facility emergency procedures
Resident's rights in an assisted living facility
Recognizing and reporting resident , neglect and
Resident's behavior and needs and providing assistance with the activities of daily living
Resident's elopement policies and procedures

On at noon Staff B stated she had the training but the administrator took out them from the record.

Class III

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

Based on observation, record review, and interview the facility failed to have 1 of 3 (B) facility staff trained in assisting residents with self administration of medications.

Findings as follow:

On at 8:50 a.m. and 9:00 a.m. observed Staff B (hired on) assisting Residents #1 and #2 self administration of medications.

Record review showed the facility failed to have documentation of the medication training (4 hours) for Staff B.

On at noon Staff B stated she had the expired training but the administrator took proof out from

Class III

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

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Based on record review and interview the facility failed to have 1 of 3 (B) facility staff trained in policies and procedures within 30 days of employment.

Findings as follow:

Record review documented the facility failed to have documentation that Staff B (hired on) had policies and procedures training.

On at noon Staff B stated proof of the policies and procedures training was taken out from records by facility administrator.

Class III

L243-LMH - Training 429.075(1) FS; 58A-5.0191(8) FAC

Based on record review and interview the facility failed to have 1 of 3 (Staff C) facility staff trained in working with Limited Mental Health residents.

Findings as follow:

Record review showed the facility failed to have documentation of 6 hours of Limited Mental Health training for Staff C who was hired on .

On at noon Staff B stated Staff C did not pass the Limited Mental Health training, yet.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Star Of Mary Adult Center
6425 Sw 93 Place
Miami, FL 33173

Dear Administrator:

This letter reports the findings of a Standard Biennial licensure 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 Verlande Exil, Health Facility Evaluator Supervisor at (305) 593-3100.

Sincerely,

Arlene Mayo-Davis, RN
Field Office Manager

AMD:ve
Enclosure
XG90

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