STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966999	03/13/2015
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Vicky's Home Alf	6402 Sw 41 Street Miami, FL 33155	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0008 - 429.26(4-6) Fs; 58a-5.0181(2) Fac - Admissions - Health Assessment S-S= D
St - A - 0079 - 58a-5.019(3) Fac - Staffing Standards - Levels 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 - 0152 - 58a-5.023(3) Fac - Physical Plant - Safe Living Environ/other S-S= D
St - A - 0160 - 58a-5.024(1) Fac - Records - Facility S-S= D
St - A - 0162 - 58a-5.024(3) Fac - Records - Resident S-S= D
St - A - 0167 - 58a-5.025 Fac - Resident Contracts S-S= D

Specific Tag Findings:

0000-Initial Comments

A Monitoring Survey was conducted on and concluded on . Vicky's Home ALF had the following deficiencies found at the time of the survey:

0008-Admissions - Health Assessment 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on record review and interview the facility failed to have a completed Health Assessment for 1 of 12 sampled residents (12) 30 days after admission to the facility.

Findings included:

On at 10:15 AM, record review found Resident #12 (Admitted /) did not have a completed Health Assessment (AHCA Form 1823) after 30 days after admission to the facility.

On at 11:00 AM the Manager acknowledged the findings, and she stated that she was going to te... ... administrator, and make sure to have the paper work done.

Class III

0079-Staffing Standards - Levels 58A-5.019(3) FAC

Based on observation, record review, and interview the facility failed to maintain a written work schedule which reflects its correct staffing pattern for a given time period.

Findings included:

On at 8:31 AM during the tour was found Staff A and B working at the facility.

On at 9:00 AM the facility's staffing schedule for the month of was posted but it did not was ... dated.

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On at 11:00 AM the Manager, stated that it was true the finding, and that she was going to talk to the Administrator to make sure to make a detail staff schedule as soon as possible.

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 Manager's failed to participate in 26 hours of CORE training and complete the CORE exam within three months of becoming the Manager.

Findings included:

On at 10:00 AM employee record review showed the Manager did not have documentation that she participated in 26 hours of CORE training and completed the CORE exam.

at 9:52 AM, the Manager stated that she had been working at the facility for nine years. On at 11:00 AM the Manager agreed that she had not taken the 26 hours of CORE neither the test and that she was going to take the the training and the test as soon as possible.

Class III

0152-Physical Plant - Safe Living Environ/Other 58A-5.023(3) FAC

Based on observation and interview the facility failed to ensure all existing architectural and structural systems were in good working order.

Findings included:

On at 10:30 AM observed what appeared to be water stains and paint peeling from the ceiling. Observed light brown stains and paint beginning to peel from the ceiling in the hallway, kitchen, and living . The dining had light brown stains and paint peeling on he ceiling.

On at 11:00 AM the Manager stated that it was true, the facility has started working on this but they had not finished it. She was going to inform this finding to the Administrator.

Class III

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

Based on observation, record review and interview, the facility failed to have an annual Sanitation Inspection report.

Findings included:

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On at 8:31 AM, observed the facility's last sanitation inspection report was dated .

On at 9:00 AM, the facility's Manager acknowledged the facility failed to have a sanitation inspection report completed annually. On at 11:00 AM, the facility's manager stated that the facility is working to correct the violations mentioned above.

Class III

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

Based on record review and interview the facility failed to ensure 1 out 12 (#10) sampled residents to have a Power of Attorney (POA), Surrogate, or Guardianship documentation in their charts.

Findings included:

On at 10:15 AM, record review found Resident #10's family member signed her documents without a POA, Surrogate or Guardianship notarized properly. Power of attorney was found on the resident's record, missing the stamp of the Notary Public only a signature.

On at 11:00 AM the Manager stated that she was going to try and get a POA as soon as possible to have it in resident's file.

Class III

0167-Resident Contracts 58A-5.025 FAC

Based on record review and interview the facility failed to ensure that 1 out of 12 (7) sampled residents had a signed contract on or before admission to the facility.

Findings included:

On at 10:15 AM record review for Resident #7 (Admitted) found resident did not have a signed contract with the monthly rate.

at 11 AM the Manager stated that they did not get a chance to do all the paper work for this resident.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Vicky's Home Alf
6402 Sw 41 Street
Miami, FL 33155

Dear Administrator:

This letter reports the findings of a Monitoring 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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