STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966998	
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
ARMERO TORRES ALF, INC	3011 NW 52 STREET MIAMI, FL 33142	

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

0000 - Initial Comments

A Complaint Inspection Survey (CCR 2015002386) was conducted on . Armero Torres Assisted Living Facility, Inc. with Limited Mental Health component had the following deficiencies at time of survey.

0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC

Based on observations, record review and interview the facility failed to have a general awareness for the resident's whereabouts for 1 out of 2 (Resident #5) sampled residents.

Findings included:

On at 1:55 PM Staff A stated, " On Resident #5 went out between 4:00 AM to 5:00 AM to buy cigarettes which is his usual as he smokes 4 packs a day. However that day he did not return after going to the store, at about 12:00 PM we went out looking for him, we didn ' t find him, I called his family because usually that is where he goes to. I then reported him missing to the police. Once that was done I received a call from the hospital. After about three days he came back to the facility and he has been doing fine. We called the psychiatrist and she followed up with him. " My residents all have a card they carry around with the facilities address and my cell phone number. "
On reviewed Resident #5 Health Assessment dated, Diagnosis; & controlled, well controlled, Nursing / services, Physical or sensor limitation: None, status: Cal... ...sistant, Nursing/ treatment: None Special precaution: Not an Elopement Risk. Activities of Daily Living Levels, Ambulation - Independent, Bathing - supervision. Eating - independent, supervision. Toilet - supervision Transfer - supervision. Resident is ambulatory.
On at 1:18 PM interviewed Resident #5 brother and he stated, " We are happy with the care he is receiving at the home, he is free to move about the neighborhood but he mostly spends his time at the home, he goes out to buy cigarettes and coffee and sometimes even comes to visit us. When he left the home, the administrator contacted us to see if he was with us. She then called us to say he was at the hospital. She is always very concerned regarding his wellbeing, we are happy with the care at the home. "
On at 3:02 PM reviewed Elopement Policy last Elopement drill dated , prior elopement drill dated

On at 2:03 PM Staff A stated, I wasn't aware that I had to report this to the agency he was found that same day
Class III

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

Based on record review and interview the facility's personnel records did not include properly documented evidence of In-service/Ongoing training for one out of one (Staff B.) sampled staff.

Findings included:

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966998	**04/13/2015**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
ARMERO TORRES ALF, INC	**3011 NW 52 STREET MIAMI, FL 33142**	

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

0081 Continued From page 1

Facility's record review on revealed sampled Staff B. (hire date) did not include evidence of Assistance with Activities of Daily Living and Behavioral Needs Training, Elopement Response Training, Emergency Preparedness & Evacuation Training, Incident Reporting Training, Resident Rights Training, Recognizing/Reporting , Neglect & , Nutritional and Safe Food Handling Training
On at 2:25 PM Staff A stated, "I have to contact the consultant to finish the missing in-services. "
Class III

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

Based on interview and record review facility failed to ensure one out of one (Staff B.) sampled staff who provide direct care to residents received a minimum of 1 hour in-service training in the facility's policy and procedures regarding

Findings included:

Facility's record review on revealed Sampled Staff B. (hire date) did not include evidence documenting proof of one hour in-service training of the facilities policies and procedures regarding available at time of survey.

On at 2:25 PM Staff A stated, " I have to contact the consultant to finish the missing in-services. "
Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on record review, and interview the Assisted Living Facility failed to have documentation of compliance with Level 2 Background Screening for all staff subject to screening requirements on one out of one (Staff B.) sampled staff.

Findings included:

Record review on found the facility did not have a complete personnel record for Sampled Staff B. (hire date) which included a copy of a completed Level 2 Background Screening prior to providing care to residents. On reviewed Background Screening on AHCA Clearinghouse eligibility dated . Awaiting Privacy Policy.

On at 2:25 PM Staff A stated, " She (Staff B) did the background screening but I have to print it. "

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966998	**04/13/2015**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
ARMERO TORRES ALF, INC	**3011 NW 52 STREET MIAMI, FL 33142**	

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

0165 - Risk Mgmt & QA; Adverse Incident Report - 429.23(1-4 & 6-10) FS; 58A-5.0241 FAC

Based on interview and record, the facility failed to report resident elopement to the Agency for one out of two (Resident #5) sampled residents.

Findings included:

On at 1:55 PM Staff A stated, " On Resident #5 went out between 4:00 AM to 5:00 AM to buy cigarettes which is his usual as he smokes 4-5 packs a day. However that day he did not return after going to the store, at about 12:00 PM we went out looking for him, we didn ' t find him, I called his family because usually that is where he goes to. I then reported him missing to the police. Once that was done I received a call from the hospital. After about three days he came back to the facility and he has been doing fine. We called the psychiatrist and she followed up with him. " My residents all have a card they carry around with the facilities address and my cell phone number. "
On at 2:03 PM Staff A stated, I wasn ' t aware that I had to report this to the agency he was found that same day. "
Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Armero Torres Alf, Inc
3011 Nw 52 Street
Miami, FL 33142

RE: CCR #2015002386

Dear Administrator:

This letter reports the findings of a Complaint 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

Miami Field Office
8333 N.W. 53rd Street, Suite 300
Miami, FL 33166
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