STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966431	06/04/2015
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
LIZI HOME CARE ALF #2	4521 SW 135 AVENUE MIAMI, FL 33175	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on , 2015. Lizi Home Care ALF #2 had the following deficiencies found at time of the survey.

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

Based on observation, record review and interview facility's administrator did not follow appropriate procedures when assisting with self administration of medication for one out of four sampled residents (#1).

Findings included:

On at 1:57 PM Staff A was observed giving medication to Resident #1. Staff A unlocked the medication cabinet and reviewed the medication book. Resident #1 was told what medication he is taking and what it was for. Resident was given medication in a cup and observed swallowing it. Then Staff A initialed the medication book.

Record review shows the medication given 10 mg tab for 4 PM initial. This medication was given two hours prior to the time documented in medication book.

On at 3:45 PM the administrator stated, "She would review the medication book and updated it."

Class III

0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC

Based on observations and interview the facility failed to keep centrally stored medications locked up at all times.

Findings included:

Observation on at 10:30 AM found medication unlocked in the right door of the refrigerator. Inside of the refrigerator contained a unlocked case with the following medications for Resident #2, 2 boxes of 10 ml vials, one R 100 units/ml vial), for Resident #5's Emergency Comfort Kit and Biscodyl 10 mg 15 each. There was a bottle of Intensol 2 mg per ml with no label.

Interview with the administrator on at 3:30 PM confirmed finding after it was showed to her.

Class III

0056 - Medication - Labeling and Orders - 58A-5.0185(7) FAC

Based on observations and interview the facility failed to have prescribed medications labeled for one out of four

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SUMMARY STATEMENT OF DEFICIENCIES
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0056 Continued From page 1

(#4) sampled residents.

Findings included:

A tour of the kitchen conducted on at 10:30 AM found medication unlocked in the right door of refrigerator. Inside of the refrigerator contained a case unlocked with medications found in it. In the case contained medications for Resident #2 (2 boxes of 10 ml vials, one R 100 units/ml vial). Resident #5's medications found in case were a (Emergency Comfort Kit and Biscodyl 10 mg 15 each). There was a bottle of Intensol 2 mg per ml with no label and no name on it. Later identified by administrator as Resident #4's medications.

Record review of the medication sheet indicates Resident #4 is taking oral Intensol 2 mg/ml.

Interview on at 3:30 PM with the administrator acknowledge the medication was not labeled.

Class III

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

Based on observations, record review and interview the facility failed to maintain a written work schedule which reflects its 24-hour staffing pattern for one out of four (#D) sampled staff.

Findings included:

Observations on at 10:30 AM of staffing schedule posted on wall was for the month of 2015. Staff D was found assisting residents. The administrator arrive at the facility at 11:11 AM.

Record review of facility staffing schedule contained three staff members listed. Staff D was not listed on the schedule.

During an interview on at 3:30 PM, the administrator acknowledge the finding after review of the staff schedule and stated, "she is from another facility and was covering for today".

Class III

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

Based on record review and interviews, the facility failed to provide documentation ensuring that one of four sampled staff (#D) who provide direct care to residents received the required in-service training within 30 days of employment.

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

0081 Continued From page 2

Findings included:

Observation during tour on at 10:30 AM of Staff D was found at facility with the residents and was observed assisting residents and preparing their meals. The administrator arrive at the facility at 11:11 AM.

Record review of staff files contained no documentation of Staff D receiving in-service training's in:

control, Reporting adverse incidents, facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation, Recognizing and reporting resident , neglect, and , Resident behavior and needs,
Providing assistance with the activities of daily living, The facility's resident elopement response policies and procedures.

Staff D records contain no application to verify her hire date.

Interview on at 3:30 PM the Administrator stated that Staff D is from another facility and is covering here for today.

Class III

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

Based on observations, record review and interview the facility failed to ensure two out of four (#D) sampled staff complete the one time education course on 2 hours and training .

Findings included:

Observation on at 10:30 AM found Staff D in facility alone with resident. There were no other staff present . Staff D was observed cleaning, cooking and preparing residents meals, assisting residents with feeding. The Administrator arrived at 11:11 AM.

Record review found no application available for review for Staff D and no documentation proving they received the / training.

Interview on at 3:30 PM the Administrator stated that Staff D is from another facility and is covering here for today.

Class III

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

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

0083 Continued From page 3

Based on observations, record review and interview the facility failed to ensure one out of four (#D) sampled staff members who have completed in First Aid and and holds a currently valid card documenting completion of such courses must be in the facility at all times.

Findings included:

Observations made on at 10:30 AM found Staff D in facility alone with resident. There were no other staff present . Staff D was observed cleaning, cooking and preparing residents meals, assisting residents with feeding. The Administrator arrived at 11:11 AM.

Record review found no application available for review for Staff D verifying hire date and no documentation proving she received the and First Aid training's.

Interview on at 3:30 PM the Administrator stated that Staff D is from another facility and is covering here for today.

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 one out of four (#C) sampled staff have successfully completed the initial 4 hour training on providing assistance with self-administered medications.

Findings included:

Record review of staff schedule shows Staff C works at facility 7 AM to 7 PM Monday through Saturdays.

Record review conducted on showed Staff C (hired) file contained documentation of 2 hours medication update training dated / . Staff C contained no documentation of initial 4 hours of assistance with self-administration of medication training at the facility.

Interview with the administrator on at 3:35 PM acknowledge Staff C does not have the 4 hours training in her file at time of survey.

Class III

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

Based on observations, record review and interview the facility failed to ensure one out of four (#D) sampled staff

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

0085 Continued From page 4

have minimum of 2 hours continuing education in topics pertinent to nutrition and food service in an assisted living facility.

Findings included:

Observations made on at 10:30 AM found Staff D in facility alone with resident. There were no other staff present . Staff B was observed cleaning, cooking and preparing residents meals, assisting residents with feeding. The Administrator arrived at 11:11 AM.

Record review found no application available for review for Staff D verifying hire date and no documentation proving she received the the 2 hours in nutrition and food service training..

Interview on at 3:30 PM the Administrator stated that Staff D is from another facility and is covering here for today.

Class III

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

Based on record review and interview the facility failed to ensure that one out of four (#D) sampled staff had training in ( ).

Findings included:

Record review revealed that sampled Staff D (hired unknown) did not have documentation proving she received the training.

Interview on at 3:30 PM the Administrator stated that Staff D is from another facility and is covering here for today.

Class III

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

Based on observations and interview the facility failed to ensure the facility the appliances are in working order.

Findings included:

Observations made during tour on at 10:30 AM in the kitchen was observed, the refrigerator lights not working. Pictures taken.

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SUMMARY STATEMENT OF DEFICIENCIES
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0152 Continued From page 5

Interview on with the administrator at 3:40 PM acknowledge the light was out and show her and stated she would replace it.

Class III

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS

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

Findings included:

Record review on showed that the Administrator did not have documentation of level 2 background screening after 5 years. A Internet search of Background Screening was completed on at 1:30 PM and showed " A New Screening is Required". The last background screening done was eligible on .

Interview with the Administrator on at 3:40 PM stated, " I did the new screening in ."

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Lizi Home Care Alf #2
4521 Sw 135 Avenue
Miami, FL 33175

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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