STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953233	08/12/2016
NAME OF PROVIDER OR SUPPLIER **VILLA SERENA II**	STREET ADDRESS, CITY, STATE, ZIP CODE **60-62 NW 33 AVENUE** **MIAMI, FL 33125**	

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

0000 Initial Comments

Complaint Survey (CCR #s 2016008926, 2016006760 and 2016007749) was conducted on / and concluded on . Villa Serena II with Limited Nursing Services component, license number 8518, had deficiencies found at the time of the survey.

0008 Admissions - Health Assessment

Based on record review and interview, the facility failed to have a Health Assessment for 1 out of 13 (Resident #5) sampled residents within 30 days of admission.

Findings Included:

Review of Resident #5's record on revealed it did not have a health assessment form (AHCA Form 1823). Resident #5 was admitted to the facility on / /

Interview on / Staff F and G at 5:15 pm stated, "His daughter did not bring his 1823."

Interview conducted on / at 7:30 pm, the facility's Administrator acknowledged that Resident #5 needed to have an AHCA Form 1823 in his file.

Class III

0025 Resident Care - Supervision

Based on observation, record review and interview, the facility failed to contact the health care provider after 1 out of 13 (Resident #2) sampled residents and had an injury.

Findings Included:
Observation on Resident #2 had redness on top of his right eye.
Review of the observation log for Resident #2 dated reported, "The resident and hit his eye, he went to ." However, there is no documentation that showed that Resident #2's doctor was contacted or that the resident was examined.
Interview on at 6:53 pm Staff F stated, "He when he was having his shower, and hit his forehead, and with the time the redness move to his eye; however, it was a slight bump. He was not attended by his doctor; he even went to ."
On at 6:53 pm Staff H stated, "We call his doctor; however, he told us that in the way we described Resident #2's , it was not necessary to do an X-ray on him."

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Interview on / / at 11:27 am Resident #2's Physician Assistant and stated, " I have not received any call from the facility regarding Resident #2's . I have not seen him for that. "
Class III

0077 Staffing Standards - Administrators

Based on record review and interview, the facility failed to appoint a separate Manager for each facility the Administrator supervises, the Administrator supervised three assisted living facilities.

Findings Included:

Record review found the facility's Administrator supervised three assisted living facilities. There was no documentation that the facility appointed a manager for the facility.

Interview conducted on / / at 7:30 pm, the facility Administrator stated "Staff B is the facility's manager. She took the Core training recently. She will do the test soon" She confirmed that there was no documentation that Staff B was appointed as a facility manager.

Class III

0079 Staffing Standards - Levels

Based on observation, record review, and interview, the facility failed to maintain a written work schedule which reflects its 24-hour staffing pattern for a given time period.

Findings Included:

Observation on / at 4:00 pm showed Staff C, D, and F were in care of the residents and providing personal services to them.

Staffing schedule review showed Staff C and F are scheduled to be in the facility 7 am- 5 pm, Staff D is scheduled to be at the facility from 6 am-10 pm Monday, Tuesday and Wednesday.

Interview conducted on at 6:10 pm, Staff F stated "Staff D works at night. We need to update the facility schedule."

Interview conducted on at 7:00 pm, Staff D stated "I work in the facility 24 hours three days a week."

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Class III

0093 Food Service - Dietary Standards

Based on observation, record review, and interview, the facility failed to follow the menu and offer snacks to 3 out of 13 (2, 3, and 12) sampled residents. The facility failed to serve meals that no more than 14 hours elapse between the end of an evening meal containing a protein and the beginning of a morning meal. The facility failed to maintain a 3-day supply of non-perishable foods.

Findings Included:

1. Observations on at 4:00 pm showed that there were thirteen residents in the facility. They were observed sitting at dining table eating dinner. The residents were served yellow rice with pork, sweet plantain, crackers, and juice. The residents were not served lettuce and fresh fruit. The facility had no canned of protein, vegetables, fruits and starches on hand.
Interview conducted with Staff F on / at 6:50 pm stated "We serve the dinner at 4:00 pm or 4:10 pm because I left at 5:00 pm. The residents receive cookies, juice or milk at bedtime. We do not have snacks for . I have lettuce and a can of fresh fruit but we do not serve vegetables at dinner. They did not want fresh fruit today. We used the emergency food supplies."
Review of the facility's menu indicated the following will be served: Hamburger on , baked fries, lettuce/ potatoes and fresh fruit.

2. Record review of the facility's Agreement for Care contract stated, "ALF will provide at least three (3) nutritious meals per day plus snacks."
Record review on stated that Residents #s 2, 3 and 12 were . The facility had a documents that reflected guidelines for ; however, there is none of the items mentioned on it, such as skim or lower fat milk, sugar substitution, sugar free beverages, fruit juice with no added salt, substitution sugar and concentrated sweets with fruits in own fruit juice, sugar free gelatin, sugar free or no sugar added pudding and sugar free or no sugar added Ice cream. It shows the use of Lean meats, baked broiled or stewed in low fat sauces, lighter margarine and mayonnaise. Also, the facility had an alternate menu to follow dietitian substitution with same nutritional value for residents.
Interview on at 6:30 pm Staff C stated, "We have the training from a Dietitian; we have to provide the meals by portions. We cook low of salt and fat for residents; we have food for and unsweet juice and fruits; however, you do not see them because it just finish."
During confidential interview conducted with Residents on at 5:10 pm, they reported that they receive breakfast, lunch and dinner. The dinner is served at 4:00 pm and it is very bad. They receive bread with one slice of ham and cheese at dinner. I do not know why we received good dinner today.

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We do not receive snacks at any time.
One resident stated, "The meals are terrible, Staff think that they cook well, but that meals are low quality and not nutritional, the facility provides dinner at 4:00 pm, we have snacks but no daily. Most of the time is a cracker with juice."
Interview on at 5:17 pm Resident #5 stated, "We have three meals a day; we have no snacks. We eat at 4:00 pm every day. "
Interview on at 5:19 pm Resident #6 stated, "I have my dinner at 4:00 pm every day. We have three meals a day, and no snacks. "
Interview on at 5:22 pm Resident #7 states, "We have three meals and the dinner is at 4:00 pm, I have sometimes snacks. Staff does not offer snacks. "
Interview on at 5:27 pm Resident #8 stated, "We have three meals daily. The snack is not every day. Staffs provide two cracker and juice. The dinner is at 4:00 pm."
Interview on at 5:31 pm Resident #13 stated, "They do not follow the menu, the meals are not good, and they do not vary the meals. We eat at 4:00 pm and we have no snacks, if they provide snacks I will eat it. "
Interview on / at 6:50 pm Resident #1 stated, "The nurse comes twice a day to see me. I eat what everyone eats. I have three meals a day and night time I have a cup of milk and on cracker but not every day. We eat dinner at 4:00 pm."
Interview on / around 4:40 pm Staff G stated, "We have no food because we are going to receive the groceries tomorrow. Also, the emergency food is low because we have been using it to replace them for new ones.
Interview conducted on / at 7:30 pm Staff A, Administrator stated "I do not understand why the dinner was served at 4:00 pm today because the staff was instructed to start the dinner preparation at 4:00 pm. The residents receive breakfast, lunch, dinner and a snack. I follow the facility menu. You cannot take only in consideration residents' interview because they are and they change their mind very easy." She confirmed that the facility did not have snacks for .

Class III

Z809 Proof of Financial Ability to Operate

Based on observations, record review, and interview, the facility failed to provide documentation to show financial ability to operate.

Findings Included:

Observations on at 4:00 pm showed that there were thirteen residents in the facility. They were observed sitting at dining table eating dinner. The residents were served yellow rice with pork, sweet

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plantain, crackers, and juice. The residents were not served lettuce and fresh fruit. The facility had no canned of protein, vegetables, fruits and starches on hand.

Interview conducted with Staff F on / at 6:50 pm stated "We do not have snacks for . I have lettuce and a can of fresh fruit but we do not serve vegetables at dinner. They did not want fresh fruit today. We used the emergency food supplies."

Interview on at 6:30 pm Staff C stated, "We have the training from a Dietitian; we have to provide the meals by portions. We cook low of salt and fat for residents; we have food for and unsweet juice and fruits; however, you do not see them because it just finish."

Review of the facility's menu indicated the following will be served: Hamburger on , baked fries, lettuce/ potatoes and fresh fruit.

During confidential interview conducted with Residents on at 5:10 pm, they reported that they receive breakfast, lunch and dinner. The dinner is served at 4:00 pm and it is very bad. They receive bread with one slice of ham and cheese at dinner. I do not know why we received good dinner today. We do not receive snacks at any time.
One resident stated, "The meals are terrible, Staff think that they cook well, but that meals are low quality and not nutritional, the facility provides dinner at 4:00 pm, we have snacks but no daily. Most of the time is a cracker with juice."
Interview on / at 5:27 pm Resident #8 stated, "We have three meals daily. The snack is not every day. Staffs provide two cracker and juice. The dinner is at 4:00 pm."
Interview on at 5:31 pm Resident #13 stated, "They do not follow the menu, the meals are not good, and they do not vary the meals. We eat at 4:00 pm and we have no snacks, if they provide snacks I will eat it. "
Interview on around 4:40 pm Staff G stated, "We have no food because we are going to receive the groceries tomorrow. Also, the emergency food is low because we have been using it to replace them for new ones.
Interview conducted on at 7:30 pm Staff A, Administrator stated "I do not understand why the dinner was served at 4:00 PM today because the staff was instructed to start the dinner preparation at 4:00 pm. The residents receive breakfast, lunch, dinner and a snack. I follow the facility menu. You cannot take only in consideration residents' interview because they are and they change their mind very easy " . She confirmed that the facility did not have snacks for .

Record review on / revealed the facility did not have the income and expense records for the previous three months.

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Interview on around 7:25 pm revealed the Administrator stated that it was not required by the regulation law to have it in the facility, and she has it in the office.

On at 9:38 am to request the income and expense records plus financial records from the facility. As of / at 7:00 pm the agency had not received any financial records from the facility.

Unclassified Deficiency

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

[illegible], 2016

Administrator
Villa Serena Ii
60-62 Nw 33 Avenue
Miami, FL 33125
RE: CCR #2016008926, 2016006760, and 2016007749

Dear Administrator:

This letter reports the findings of a Complaint licensure survey that was concluded on 12, 2016 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. **Please attach a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents to the Field Office no later than [illegible], 2016.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiencies identified on your survey, which may include a desk review or onsite revisit.

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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