RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
A1a Care Center, Inc
641 West 33 Street
Hialeah, FL 33012

Dear Administrator:

This letter reports the findings of a **second** State Licensure Revisit Survey conducted on 8, 2016 by representative(s) of this office.

Attached is the provider's copy of the State (3020) Form, which indicates the deficiencies corrected during the visit, uncorrected deficiencies and/or new deficiencies that were identified on the day of the visit.

You will not receive a copy of this report in the mail; you will only receive this faxed report. **All deficiencies shall be corrected no later than , 2016.**

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 Sonia Bailey, Health Facility Evaluator Supervisor at (305) 593-3100.

Sincerely,

for

Arlene Mayo-Davis, RN
Field Office Manager

AMD/sb
Enclosure

YOSF

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965862	R

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
A1A CARE CENTER, INC	641 WEST 33 STREET HIALEAH, FL 33012

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

0000 Initial Comments

An Abbreviated Biennial survey, 2nd revisit, was conducted on . A1A Care Center, Inc (Lic# 10201) had the following deficiencies found at the time of the survey:

0010 Admissions - Continued Residency

Based on observation, interview, and record review the facility failed to have an updated health assessment for one of five sampled residents (Resident #4) . The facility also failed to follow admission licensure standards and determine the appropriateness for continued residency for two of five sampled residents (#2 and 4). The facility further failed to ensure that one of six sampled residents (Residents # 4) had an accurate and completed health assessment with significant change in medical condition.

Findings included:

On at 8:30 am, observed that the facility had two hospice residents in bed at 8:30 am (Residents # 2 and 4) .
A review of Resident #4 ' s AHCA Form 1823 (Health Assessment) revealed, Resident #4 (under hospice care) needed total assistance with and toileting. Also, Resident #4 ' s Form 1823 stated that Resident #4 needed assistance with transfer, and Resident #4 had no ambulation. "
A review of Resident #4 ' s Form 1823 dated on stated, "Resident #4 needs supervision in ambulation, eating, , transferring and toileting. Resident #4 needs assistance with bathing and dressing. Resident #4 has a Regular diet, and facility meets resident ' s needs. " Resident #4 ' s Form 1823 did not reflect that resident was under hospice care and had changes on her ADLs.
A review Resident #4 ' s Form 1823 revealed that there was an order from the doctor (hospice) that stated, " Puree diet and crushed medication.
A review of Resident #4 ' s Hospice records showed that Resident #4 was admitted on as a hospice resident.
A review of the facility ' s Fire Department Inspection dated on / / states, " Advised hospice patients/hospice residents not allowed. "
Interviewed on at 10:30 am, the Administrator stated, " Resident #4 recently was admitted to hospice, and I will get a new health assessment (Form 1823). I already call to the hospice to get it. "
Interviewed on at 10:42 am by phone the Hospice ' s Director of Clinical Services stated, " This is the first time I heard about an ALF not having hospice resident allowed in the facility. I will continue investigating. I don ' t know how to proceeded taking in consideration hospice ' s policies; I will also speak with the administrator, she never mentioned to me. "

Interviewed on at 11:00 am, the Administrator stated, " The Fire Department Inspection reflects

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that the facility is not allow to have hospice residents, and there are two hospice residents in the facility right now; however, I moved them from the # to # , where there is access to a door, and it will take less time to take them out from the facility at a time of an emergency. "

Record review showed that there was not an updated record from the Fire Department to reflect approval of the residents' changed location.

Class III

0160 Records - Facility

Based on observation, record review and interview facility failed to had an annual sanitation inspection in clearance. Facility ' s annual sanitation reflects advice to not have hospice resident.

Findings included:

Observation on / at 8:30 am facility ' s inspection posted on the bulletin board in the dining revealed that that last sanitation inspection was conducted on /, and it stated, " Advised Owner Hospice Patients Not Allowed. "

Record review on Resident #4 ' s Hospice information stated that Resident #4 was admitted on / as a hospice resident.
Further record review on / facility ' s Hialeah Department Inspection dated on / states, " Advised hospice patient hospice resident not allow. " Interview on at 10:30 am administrator stated, " Resident #4 recently was admitted on hospice, and I will get a new health assessment (Form 1823), I already call to the hospice to get it. "
Interview on / at 10:42 am by phone the Hospice ' s Director of Clinical Services stated, " This is the first time I heard about an ALF not having hospice resident allow in the facility. However, she stated, " I will continue investigating. I don ' t know how to proceeded taking in consideration hospice ' s policies; I will also speak with the administrator, she never mentioned to me. "

Interview on at 11:00 am facility ' s administrator stated, " The Fire Department Inspection reflects that the facility is not allow to have hospice ' s residents, and there are two hospice residents in the facility right now; however, I move them from the # to # , where there is access to a door, and it will take less time to take them out from the facility at a time of an emergency. "

Class III

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