STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968092	09/27/2016
NAME OF PROVIDER OR SUPPLIER **VANGELA'S ALF CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **789 NW 145 TERRACE** **MIAMI, FL 33168**	

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

0000 Initial Comments

A Complaint (CCR# 2016008102) Survey was conducted on , 2016. Vangela's ALF Corp had the following deficiencies identified at time of the survey.

0008 Admissions - Health Assessment

Based on record review and interview, the facility failed to have an accurate and completed health assessments for two out of four (#2) sampled residents.

Findings included:

Record review on found that the health assessments for Residents #1 stated "needs medication administration" and Resident #2 had no diagnoses listed.

The health assessments for Residents #1 and 2 were reviewed with the Administrator on / at 3:15 PM and she confirmed that the questions were not answered correctly and was not completed. The owner/ Staff B stated on at 3:15 PM that she assist residents with their medications.

Class III

0026 Resident Care - Social & Leisure Activities

Based on observation and interview the facility failed to have an activities calendar with a least 12 hours for activities six days a week.

Findings included:

Observations made on at 1:00 PM during tour found activities calendar posted in the facility. The calendar had no hours listed and showed activities conducted for eleven days.

Interview on at 2:30 PM with Staff B (owner) stated, "I will updated it."

Class III

0055 Medication - Storage and Disposal

Based on observation and interview the facility failed to ensure medications must be centrally stored and

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kept in a locked area at all times.

Findings included:

During tour on / at 1:00 PM found medications unlocked in a cabinet next to the owner's . The cabinet was found unlocked and all of the resident medication were in the cabinet.

Interview on with Staff B (owner) acknowledge the medications were found unlocked.

Class III

0078 Staffing Standards - Staff

Based on record review and interview the facility failed to ensure staff had proof of a negative examination documented on an annual basis for one out of three (C) sampled staff.

Findings included:

Record review of staff files showed Staff C (hired / /) has no documentation proving he had a negative completed on an annual basis. The last statement is dated / and expired on .

Interview on / at 2:30 PM with Staff B after review of Staff C acknowledged he does not have an updated test completed.

Class III

0160 Records - Facility

Based on record review and interview, the facility failed to have proof of a satisfactory annual sanitation inspection and an updated admission and discharge log.

Findings included:

Record review of the facility files found that the sanitation inspection dated / / results stated RE-Inspect Charge.

Interview conducted on at 2:30 PM with Staff B stated, "It's probably because I have not paid

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them yet. I will have to go and pay them."

Record review of the admission and discharge showed Resident #3 listed was admitted on / / and had no discharge date.

Interview conducted on at 2:30 PM with Staff B stated, "She is no longer here."

Class III

0161 Records - Staff

Based on record review and interview the facility failed to provide a copy of the employment application with references furnished for one out of three (A) sampled staff.

Findings included:

Internet search made on the Florida Facility Finder found Staff A was listed as the Administrator. Record review of her file found Staff A's application date had no hire date and no references listed.

Interview conducted on at 2:35 PM with Staff B confirmed findings after review of Administrator's file.

Class III

Z814 Background Screening Clearinghouse

Based on record review and interview the facility failed to ensure that staff members (A, B, and C) were registered with the background screening's clearinghouse.

Finding included:

Background screening website roster found none of the staff members listed in the clearinghouse. Record review found Staff A, B, and C were listed as employees.

Interview conducted on at 3:15 PM with Staff B acknowledge clearinghouse was not done.

Unclassified

RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

, 2016

Administrator
Vangela's Alf Corp
789 Nw 145 Terrace
Miami, FL 33168
RE: CCR #2016008102

Dear Administrator:

This letter reports the findings of a Complaint licensure survey that was conducted on , 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 , 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 -Davis, RN
Field Office Manager

AMD:ve
Enclosure

XG90

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