



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

, 2016

Administrator
Residencia Nurstra Senora De La Esperanza Home Car
11125 Sw 48 Street
Miami, FL 33165

Dear Administrator:

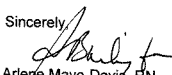
This letter reports the findings of a state relicensure survey that was conducted on 14, 2016 by representative(s) of this office.

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 , 2017.** 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 Sonia Bailey, Health Facility Evaluator Supervisor at (305) 593-3100.

Sincerely,


Arlene Mayo-Davis, RN
Field Office Manager

AMD/sb
Enclosure

XG90

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**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 12/13/2016
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964118	(X3) DATE SURVEY COMPLETED 11/14/2016
NAME OF PROVIDER OR SUPPLIER RESIDENCIA NURSTRA SENORA DE LA ESPERANZA	STREET ADDRESS, CITY, STATE, ZIP CODE 11125 SW 48 STREET MIAMI, FL 33165	

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

0000 - Initial Comments

A standard biennial survey was conducted from 14th, 2016 and concluded on 21st, 2016. Residencia Nuestra Senora De La Esperanza Home Care Corp. with limited mental health component and license number 8873 had the following deficiencies identified at the time of the survey:

0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC

Based on record review and interview, the Assisted Living Facility failed to maintain an updated written record of any significant change for one (#2) out eight sampled residents.

Findings included:

Review of Resident #2's record revealed there was a dramatic increased in weight in a period of four months. Resident #2's weight on was 284 lbs., on / was 280 lbs., on was 290 lbs. and on was 300 lbs.
In an interview on / / at 12:47 PM the Administrator revealed that weight scale that was in the facility did not read the weight for Resident #1 or #2. I wrote it for what those residents told me.
In an interview on / / at 12:51 PM the Administrator revealed that she called Resident #2's primary physician.

Review of Resident #2's record revealed that there was no documentation that Administrator called and informed Resident #2's primary physician about the weight change.

Class III

0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28(1-2) FS

Based on record review and interview, the Assisted Living Facility failed to post the menu in the language that one out of six sampled residents could understand (#1).

Findings included:

- Review of the only menu posted in the facility's kitchen revealed that menu planned for week / - / was written in Spanish and food substitutions for / were written in Spanish.
In an interview on / / at 8:05 AM Resident #2 revealed that he read only English.
In an interview on / / at 8:10 AM Resident #1 revealed that she read only English.

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Class III

0031 - Resident Care - Third Party Services - 58A-5.0182(7) FAC

Based on observation, interview, and record review, the Assisted Living Facility failed to ensure that a third party (Home Health Agency) left documentation in the facility of the services provided to one out of eight sampled residents (#1).

Findings included:

Observation on 11/14/16 at 8:42 AM revealed that there was a box with a vial inside at the top drawer inside refrigerator; it was labeled for Resident #1 with instruction stating: inject 10 units in the morning and every evening.

In an interview on 11/14/16 at 10:24 AM the Administrator revealed that Resident #1's nurse had not left any record in the facility with the information about the home health agency, and that the nurse stated that she did not have to leave any information. Administrator further revealed that Resident #1's nurse came twice a day, early in the morning and in the afternoon after 2:30 PM or 3 PM.

In an interview on 11/14/16 at 10:40 AM the Administrator revealed that Resident #1's nurse did not leave any information, not even the nurse's phone number.

Review of facility's record revealed that there was no record in the facility with the information about the home health agency for Resident #1.

Class III

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

Based on observation and record review, the Assisted Living Facility failed to assist resident with self-administration of medication within an hour before or after scheduled time of one (#3) out of eight sampled residents.

Findings included:

1. Observation on 11/14/16 at 11:46 AM revealed that the Caregiver B assisted Resident #3 with self-administration of medications with 1 mg.
2. Record review of Resident #3's Medication Observation Record revealed that 1 mg tablet one tablet by mouth three times a day and it was scheduled at 8 AM, 3 PM and 8 PM.

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0054 - Medication - Records - 58A-5.0185(5) FAC

Based on record review and interview, the Assisted Living Facility failed to ensure that Medication Observation Records (MORs) had documented residents' , residents' health care provider and health care providers' telephone number for two out of eight sampled residents (#3, and #6) .

Findings included:

Review of Resident #3's MORs revealed that it did not include Resident #3's

Review of Resident #6's MORs revealed that it did not include Resident #6's , health care provider and health care providers' telephone number.

In an interview on / / at 1:08 PM via telephone the Administrator revealed that the MORs' were prepared by the pharmacy.

Class III

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

Based on observation and interview, the Assisted Living Facility failed to keep medications secured at all times.

Findings included:

Observation on / / at 8:42 AM revealed that there was an unlocked box in the refrigerator and inside it there was a paper box with Kwik Pen. It was labeled for Resident #8 with instructions for use according to a sliding scale. There was a box with a vial inside at the top drawer inside refrigerator; it was labeled for Resident #1 with instructions stating: inject 10 units in the morning and every evening.

In an interview on / / at 10:21 the Administrator revealed that Resident #1's nurse left the box opened and Resident #8's medicine was for a resident that was never admitted.

Class III

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review and interview, the Assisted Living Facility failed to ensure that the Administrator had documentation of a negative examination annually.

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Findings included:

Review of Administrator's personnel record revealed that last documentation of a negative examination was on 10/06/15.

In an interview on 11/14/16 at 2:06 PM the Administrator revealed that she thought that statement of free of communicable would cover

Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on interview, observation and record review, the Assisted Living Facility failed to offer a variety of meals adapted to the food habits and preferences of the residents. The facility also failed to write substitutions before or when meal was served.

Findings included:

In an interview on // at 8:05 AM the Resident #2 stated "I don't like the food it is awful. They cook rice and beans almost every day."

In an interview on // at 8:10 AM the Resident #1 stated "I don't like to eat rice and beans, first because I am a and second because I don't like it."

Observation on // / at 11:29 AM revealed that lunch served to Resident #3 was white rice, green beans and ground beef with potatoes and for dessert peaches.

Review of facility's menu revealed that Substitutions were written in Spanish: white rice, ground beef, salad, sweet.

Class III

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

Based on observation and interview, the Assisted Living Facility failed to ensure that all existing architectural, mechanical, electrical and/or structural systems were maintained in good working order.

Findings included:

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Observation on 11/14/16 at 8:04 AM revealed that in the bathroom between Room #4 and #5 there was a hole in the ceiling where the bathroom's exhaust fan was supposed to go.
In an interview on 11/14/16 at 11:13 AM the Administrator revealed that bathroom exhaust fan cover and Administrator's husband needed to fix it.

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on record review and interview, the Assisted Living Facility failed to have a current health inspection.

Findings included:

Review of facility's record revealed that last health inspection was conducted on 11/14/16.
In an interview on 11/14/16 at 11:37 AM the Administrator revealed that health inspection had not been done because they haven't come yet. It expired just few days ago.

Class III