STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968824	**04/06/2017**
NAME OF PROVIDER OR SUPPLIER **JIMENEZ SENIOR CARE INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **20581 SW 124 CT** **MIAMI, FL 33177**	

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

0000 - Initial Comments

A Standard Biennial Survey was done on , , 2017. Jimenez Senior Care Inc., License #12693, had the following deficiencies identified at time of the survey:

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

Based on record review and interview the facility failed to provide evidence of a negative ( ) examination annually for 3 out of 4 sampled employees (#A, B, and C).

Findings included:

Staff A (hired), Staff B (hired), and Staff C (hired) had documentation that a test had been done, however there was no documentation of a negative result.

In an interview on at 3:30 PM, the Administrator stated, " I will have the doctor document it."

Class III

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

Based on observation, record review, and interview, the facility failed to have a menu posted conspicuously in an area accessible to residents.

Findings included:

Observations on at 9:20 AM found no menu posted in dining area where resident eat their meal. A menu was found in the kitchen.

Interviewed on at 3:20 PM, the Administrator stated, "I will put one up for them."

Class III

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

Based on record review and interview, the facility failed to have an up to date admission and discharge log and have an approved Comprehensive Emergency Management Plan (CEMP).

Findings included:

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Observations made on at 9:30 AM of facility for the CEMP letter posted on the wall dated and expired . The facility had a census of five resident's (#1, 2, 3, 4, and #5).

Record review of the admission and discharge log found Resident's #2,3, 4, and 5 listed. Resident #1 admitted to the facility on was not listed on the log.

Interviewed on at 3:45 PM, the Administrator acknowledged the admission and discharge log was not updated and stated regarding the CEMP , "I sent it since . I have the receipt and I still haven't receive. the letter."

Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

Based on record review and interview, the facility failed to provide documentation that references were included on the employment application for one out of four sampled staff (#B).

Findings included:

Observations made on at 9:30 AM found Staff B working at the facility with the Administrator. The staff schedule showed Staff B worked 7 AM to 7 PM.

A review of the personnel file showed that Staff B (hired) had no references on her job application.

Interviewed on at 3:45 PM, the Administrator acknowledged there were no references on the application for Staff B.

Class III

0162 - Records - Resident - 58A-5.024(3) FAC

Based on record review and interview the facility failed to have documentation that one out of five (Resident #1) sampled residents who received assistance with activities of daily living was weighed on admission. The facility also failed to provide documentation that Resident #1 received from a home health agency.

Findings included:

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

Record review showed that there was no documentation that the facility had a weight record initiated for Resident #1, admitted on . Resident #1's medication log show the Home Health Agency for home health agency who provide and administrator the daily. There was no documentation to verify when the resident receive her administration.

On at 3:30 PM, the Administrator acknowledged the facility did not weigh the residents on admission for Resident #1, and that the resident received administration from the home health agency even though there was not documentation of it.

Class III