STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965986	R **05/12/2017**
NAME OF PROVIDER OR SUPPLIER **IZQUIERDO HOME CARE I**	STREET ADDRESS, CITY, STATE, ZIP CODE **311 SW 62 AVE** **MIAMI, FL 33144**	

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

0000 - Initial Comments

A standard biennial revisit survey was conducted on , 2017 through , 2017. Izquierdo Home Care I, Inc, license #10302, had deficiencies identified at the time of the survey:

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

Based on record review and interview, the facility failed honor resident's rights to be free of financial for one out of four sampled residents (Residents #3). The facility's Administrator accessed the resident's bank account by using the resident's debit card. Facility failed to provide the refund to one out of four sampled residents (Resident #2).

Findings include:

Interviewed on at 3:34 PM, the Administrator stated, "I get paid by Resident #3 on 4th. I did not receive more cash from them after the incident except from Resident #3. I did not get Resident #3's check. I went with him to withdraw the money and gave it to the other Alf."

Fax received from the facility in the office on . It included a written statement from administrator in Spanish that revealed Resident #3's check was given completely to the other facility that he moved to; the check for the woman who left and the employee gave her the chart; the check was not cashed because they gave it to me and I took too long going to the bank and they asked for it (one part), I returned it completely because I do not want to have more problems with the son."

Review of facility's admission and discharge log revealed that Resident #2's discharge date was on .

Interview via telephone on at 1:39 PM the Administrator revealed that neither Resident #2 or her family requested any refund, and therefore the Administrator did not return any money. She did not have any problem with any of the residents or their families.

Uncorrected
Class III

0120 - Fiscal - Financial Stability - 429.17(3) FS: 429.275(1)58A-5.021(1) FAC

Based on record review and interview the facility failed to provide the business bank statement and verification of resident fees collected, as requested.

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Findings included:

The Administrator was called for an interview on . . . . . at 3:09 PM and the business bank statement for . . . and , 2017 was requested.

A review of a fax received from the facility in the office on . . . . . included a written statement from the Administrator in Spanish that revealed that the bank informed that the , statement was not ready and facility's accountant had the . . . statement.

Class III
Uncorrected

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

Based on record review and interview, the Assisted Living Facility failed to provide a personnel file for one out of five sampled employees (Maintenance D).

Findings included:

Review of previous survey conducted from 02// . . through . . revealed that on . . . . at 8:00 AM, observed Maintenance D was alone in # , making repairs, while Residents #1 and #2 were sleeping.

Record review showed the facility did not have personnel file for Maintenance D's (hired date unknown).

Iinterviewed on . . . . . at 2:39 PM the Administrator revealed that Maintenance D just went to the facility for helping to transfer a recliner because Maintenance C was not in the facility.

Class III
Uncorrected

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

Based on record review and interview, the Assisted Living Facility failed to have a signed informed consent to assistance of medication by unlicensed personnel for one out of four (Resident #2) sampled residents.

Findings included:

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Review of facility's admission and discharge log revealed that Resident #2's admission date was on .

Review of Resident#2's record revealed that informed consent to assist with medication by unlicensed personnel was not signed.

An interview on at 3:25 PM with the Administrator revealed that Resident #2 received assistance with medicines while the resident lived in the facility.

Class III
Uncorrected

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SUMMARY STATEMENT OF DEFICIENCIES
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Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on interview and record review, the Assisted Living Facility failed to maintain the employment status of all employees within the Background Screening Clearinghouse Database and any changes in status must be reported within 10 business days.

Findings included:

An interview on at 3:40 PM the Administrator revealed that Caregiver E stopped working in the facility on Monday .

A review of the facility's roster in the Background Screening Clearinghouse Database on showed that facility's employee roster showed Caregiver E with a hire date of , but it did not show an end date.

Unclassified
Uncorrected

Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on record review and interview, the Assisted Living Facility failed to provide documentation of an eligible level II background screening for one out of five (Maintenance D) sampled staff.

Findings included:

A review of previous survey conducted from 02// through revealed that on at 8:00 AM, observed Maintenance D was alone in # , making repairs, while Residents #1 and #2 were sleeping.

Record review showed the facility did not have personnel file for Maintenance D's (hired date unknown). A review of the Background Screening Clearinghouse Database showed that Maintenance D had not been added to the facility's roster.

An interview on at 2:39 PM the Administrator revealed that Maintenance D just went to the facility for helping to transfer a recliner because Maintenance C was not in the facility.

Unclassified
Uncorrected

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