

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 08/21/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966807	(X3) DATE SURVEY COMPLETED 08/01/2017
NAME OF PROVIDER OR SUPPLIER STAR OF MARY ADULT CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 6425 SW 93 PLACE MIAMI, FL 33173	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A Standard Biennial Survey was conducted on . Star Of Mary Adult Center with Limited Mental Health component, license #10939, had the following deficiencies found at the time of the survey: 0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC Based on observation and interview the facility failed to provide a safe living environment for residents. Findings included: On . at 11:00 AM observations of the left side, of the outside facility, with discarded furniture, toilet, chairs and other debris piled up. On . at 11:10 AM the Administrator stated the reason why all these things were there was because he has been taking out little by little. And he still has to get rid of the rest that was there. Class III 0162 - Records - Resident - 58A-5.024(3) FAC Based on record review and interview, the facility failed to ensure one out of six sampled residents (#6) to had a Power of Attorney (POA), Surrogate, or Guardianship documentation. Findings included: Record review found Resident #6, admitted on , paperwork was signed by her daughter without a POA, Surrogate, or Guardianship documentation on file. On . at 11:10 AM the Administrator stated that the documents were in resident's file but another agency came to the facility and reviewed the resident's file and probably they took the POA. Class III		