STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965178	**08/23/2017**
NAME OF PROVIDER OR SUPPLIER **EDELMIRA ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **19720 SW 116 AVENUE** **MIAMI, FL 33157**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on . Edelmira ALF with Limited Mental Health component License #9683 had the following deficiencies found at time of the survey:

0008 - Admissions - Health Assessment - 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on observation, record review, and interview the facility failed to have updated health assessment completed by a healthcare provider after a significant change for 1 out of 2 sampled residents (Resident #1).

Findings Included:

On at 11:27 observed Resident #1 walking with assistance from Staff B.

A review of Resident #1's Health Assessment dated , showed medical History diagnoses: , , , , , , , , HLP, OA, and Parkinson's . The resident requires total assistance with all Activities of daily living. The resident Needs assistance with self-administered medications.

On at 11:18 AM Staff B stated "The Resident's daughter administers the medication, she usually comes twice a day to give it to her."

On at 2:58 PM, the Resident's daughter stated that she visits the resident twice a day to administer her medication.

Class III

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

Based on record review and interview, the facility failed to provide records of the daily services provided by a home health agency to 1 of 1 sampled residents (Resident #6)

Findings Included:

Record review of Resident #6's home health file revealed the last recorded log was on .

On at 10:40 AM Staff B stated "I don't know why it is not current, the home health nurse is

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the one that manages the recording of the log. The nurse comes every day for Resident #6 to administer the ."

Class III