STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965726	R 10/17/2017
NAME OF PROVIDER OR SUPPLIER **FARDALES HOME ALF CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **1091 EAST 18 STREET** **HIALEAH, FL 33013**	

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

0000 - Initial Comments

A Standard Biennial Survey Revisit was conducted on 17, 2017 (Lic# 10087). Fardales Home ALF Corp with Limited Mental health Services component had the following deficiencies found at the time of survey:

0125 - Fiscal - Surety Bonds - 429.27(2) FS; 58A-5.021(3) FAC

Based on record review and interview the facility failed to have a surety bond equal twice the value of the residents' monthly income for two of five residents sampled (Residents # 2 and 3) .

Findings included:

Review of the facility's record showed that the facility did not have a surety bond with a minimum bond that equal twice the value of the residents 'monthly income.

On at 1:40 PM the Administrator stated that the person that does the liability insurance for them stated that they do not do the surety bond. She stated that the facility is still the payee for Residents # 2 and # 3.

Uncorrected
Class III

L243 - LMH - Training - 429.075(1) FS; 58A-5.0191(8) FAC

Based on record review and interview, the facility failed to have an update training of 3 hours regarding limited mental health for one of three sampled staff (Staff B).

Findings included:

A review of Staff B's record revealed that she was hired on and that her file contained documentation of 8 required hours of limited mental health training on . There was no documentation of 3 hours update training on the topic.

The administrator stated on at 2:50 PM that Staff B had completed the 3 hours update recently.

The facility owner stated on at 2:54 PM, "I know I put it in her record. I will call the place where she did it and will ask for a copy."

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