STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965438	R 10/25/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
J R FAMILY CARE	**1110 NORTHWEST 134TH AVENUE** **MIAMI, FL 33182**

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

0000 - Initial Comments

A Standard Biennial Revisit Survey was conducted on 10/19/17 & 10/25/17. J R Family Care (license #9835) had the following deficiencies identified at time of the survey:

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on record review and interview the facility failed to provide documentation of the high school diploma or G.E.D for the facility's Manager (Staff B).

Findings as follow:

Personnel record review showed there was no record of the high school diploma or G.E. D for Staff B (Manager), hired on . . . . .

On . . . . at 1:00 PM, Administrator acknowledged the high school diploma for Staff B was not in the file.

Class III

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

Based on record review and interview, the facility failed to provide documentation of a completed health assessment for one out of four (Resident #1) sampled residents.

Findings include:

Record review found that Resident #1's health assessment dated . . . . did not indicate what type of assistance was required with medications.

Interviewed on at 1:00 PM, the Administrator stated that a Hospice nurse administered Resident #1's medications.

Class III