STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966601	**11/13/2017**
NAME OF PROVIDER OR SUPPLIER **BJ HOME CARE INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2218 SW 26 LANE** **MIAMI, FL 33133**	

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

0000 - Initial Comments

A standard biennial survey was conducted on 11/ . BJ Home Care Inc. with a Limited Mental Health Component, license #10778 had the following deficiencies found at the time of the survey:

0052 - Medication - Assistance with Self-Admin - 58A-5.0185 (3)

Based on observation, record review and interview, the facility failed to follow the procedure outlined by the state when assisting two of nine sampled residents with self-administration of medications (Resident #3 and #5).

Findings included:

On 8:06 AM observed Staff B, during medication pass for Residents #3 and #5. Staff put medications in her hand and then into a small cup and gave them to the residents.

On at 8:15 AM when asked why she put the medications in her hand, Staff B stated that she was a little nervous ant that was the reason why she did it improperly.

Cass III

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interview, the facility failed to keep appurtenances and structures in good working order. A closet door was off its hinges.

Findings included:

On at 7:40 AM, observed the linen closet door off of its hinges and leaning against the wall.

On at 7:50 AM, Staff B stated that this door just felt down this morning and they were waiting for the administrator to come to the facility to fix it.

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

The facility failed to provide documentation that it performed at least two elopement drills per year or monthly fire drills.

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

Findings included:

Record review showed the facility had conducted an elopement drill on and and had conducted Fire drills on , , .

On at 11:34 AM, the Administrator stated that he did not know why the elopement drills were not up to date. He further stated that he had an understanding that the facility only needed to do fire drills every three or four months.

Class III