STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911859	**01/09/2018**
NAME OF PROVIDER OR SUPPLIER **SENIOR RETIREMENT HOME, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3033 SW 6 STREET** **MIAMI, FL 33135**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on . Senior Retirement Home with a Standard license (#7813) had the following deficiencies found at time of the survey:

0080 - Training - Core & Competency Test - 429.52(1-2) FS; 58A-5.0191(1) FAC

Based on record review and interview, the facility failed to ensure that the Administrator successfully completed the assisted living facility training passing CORE exam within 3 months from the date of becoming a facility administrator.

Findings included:

Record review revealed the Administrator, hired on , did not have documentation of passing the CORE training exam within 3 months of employment.

On at 12:10 PM Caregiver B stated she was going to take the CORE training in because the owner realized that the Administrator had no passed the CORE.

Class III

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

Based on record review and interview, the facility failed to have a updated weight records for one of five (#2) sampled residents who needed assistance with activities of daily living (ADLs). The facility also failed to have a Power of Attorney (POA), Surrogate, or Guardianship documentation for one out of five (#4) sampled residents.

Findings included:

Resident #2's last weight information was dated on , at the time of the admission. Record review showed Resident #2 needed assistance with activities of daily living (ADLs). The facility did not have record Resident #2's weights every six months.

Record review showed Resident #4 was admitted to the facility on . Resident #4's contract was signed and dated by resident's niece. The facility did not have proof of a POA, Surrogate, or Guardianship documentation authorizing Resident #4's family member to sign the contact.

On at 12:45 PM the findings were explained to Caregiver B and she stated that she was going

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to informed this to the owner and the Administrator.

Class III