

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965741	(X3) DATE SURVEY COMPLETED R 01/25/2018
NAME OF PROVIDER OR SUPPLIER ABUELITAS HOME INC	STREET ADDRESS, CITY, STATE, ZIP CODE 15257 SW 61ST STREET MIAMI, FL 33193	

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

0000 - Initial Comments -

A Follow Up to a Biennial Survey was conducted on Abuelitas Home Inc. with a standard license #10139 had the following deficiencies identified at the time of the survey:

0079 - Staffing Standards - Levels - 58A-5.019(3) FAC

Based on observation, record review, and interview, the facility failed to maintain a written work schedule that reflects its 24-hour staffing pattern for a given time period.

Findings included:

Staff C and Staff D were observed in the facility with the residents and at 12:19 PM Staff A walked in the facility.

A review of the facility's staffing pattern revealed that Staff A and Staff C were scheduled to work as "live in" on

During an interview on at 1:48 PM Staff A stated "Staff C was out to do labs work in the morning that is why Staff D came in." Staff A added "I added Staff D to the roster last night and I didn't put her in the schedule."

Class III

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

Based on record review and interview, the facility failed to have an accurate and completed health assessment for one out six sampled residents (Resident #4). Moreover, the facility failed to have an updated recertification for hospice care for one out of six sampled residents (Resident #1).

Finding included:

A review of Resident #3 's file on revealed that on the Health Assessment dated , the type of diet was not specified.

A review of Resident #1's file revealed that the Recertification for hospice for the 60 day period dated was expired.

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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FORM APPROVED

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During the exit interview on at 01:48 PM, Staff A acknowledged that the Health Assessment was incomplete and the type of diet was not specified. Class III		