

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/02/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965876	(X3) DATE SURVEY COMPLETED R 02/08/2018
NAME OF PROVIDER OR SUPPLIER WE "R" FAMILY USA CORP	STREET ADDRESS, CITY, STATE, ZIP CODE 2230 SW 131 COURT MIAMI, FL 33175	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A standard biennial survey 2nd revisit was conducted on We "R" Family USA Corp Inc with a Limited Mental Health component (AL10197) had the following deficiencies found at the time of the survey: 0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC Based on observation, record review and interview the facility failed to maintain personnel records for 1 out of 4 (Staff D) staff members Findings as follow: On at 7:50 a.m. Staff D was observed assisting resident #1 with transferring. Staff record review showed the facility did not keep a personnel record for Staff D . On at 7:40 a.m. Staff E stated during an interview the facility did not have a staff record for Staff D. Staff E said he brought Staff D to assist Staff A with residents because all residents needed assisted with bathing to avoid Class III		

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Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS Based on observation, record review, and interview the facility failed to conduct the Level 2 background screening for 1 out of 4 (Staff D) facility staff prior to providing care to the residents. Findings as follow: On . at 7:50 a.m. Staff D was observed in facility assisting Resident #1 with transferring. Record review showed the facility did not have a level 2 background screening conducted for Staff D. On at 8:30 a.m. Staff E stated Staff D did not have a background screening. Staff E said he brought Staff D to assist Staff A with residents because all residents needed assisted with bathing to avoid . Unclassified		