

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/02/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967227	(X3) DATE SURVEY COMPLETED 02/27/2018
NAME OF PROVIDER OR SUPPLIER J H PUIG INVESTMENTS INC	STREET ADDRESS, CITY, STATE, ZIP CODE 3144 SW 21 STREET MIAMI, FL 33145	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on J H Puig Investments Inc. with a Standard license # 11319 had the following deficiencies found at the time of the survey:

0082 - Training - / - 58A-5.0191(3) FAC

Based on record review and interview the facility failed to ensure that staff complete a one hour education course on and . within 30 days of employment for one out of four sampled staff (Staff A).

Findings included:

Personnel record review of Staff A revealed that he was hired on . There was no documentation that the employee received a one hour education course in and . within 30 days of employment.

On at 12:30 PM the Assistant Administrator stated that the training must had been misplaced because Staff A had been working at the facility for a long time.

Class III

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(5) FAC

Based on record review and interview the facility failed to ensure that unlicensed staff that assist residents with self-administration of medications receive annually, a minimum of 2 hours of continuing education training on providing assistance with self-administered medications and safe medication practices in an assisted living facility for one out of four sampled staff (Staff D).

Findings included:

A review of Staff D's personnel record revealed that she had taken 4 hours of continuing education training on providing assistance with self-administered medications and safe medication practices in an assisted living facility dated There was no documentation that the employee had received 2 hours of continuing education training on the topic.

On at 12:30 PM Assistant administrator stated that she was going to tell the administrator

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about this because she knew that Staff D had all the trainings. Class III		

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Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c) FS Based on observation, record review, and interview the facility failed to ensure that two out of four sampled staff obtained a new eligible Level II background screening did not have a break in service from a position that required level 2 screening for more than 90 days. (Staff B and D) Findings included: On at 7:40 AM was observed Staff D was taking care of the five residents in the facility . On at 10:20 AM Staff B arrived at the facility because the administrator needed to go to a doctor's appointment. A review of the staff personnel's file revealed that Staff B was hired on and she had not worked in another facility prior to this one and the Background screening was dated A review of the personnel record for Staff D showed that she was hired on and that last she worked previously at another facility in A review of the Background Screening Clearinghouse revealed that Staff D's last date of background screening was dated Unclassified		