STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966210	**06/14/2018**
NAME OF PROVIDER OR SUPPLIER **SAN JUDAS LOVE & CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **17715 NW 87 COURT** **MIAMI LAKES, FL 33018**	

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

0000 - Initial Comments

A Complaint (CCR# 2018005367) Survey was conducted on , 2018. San Judas Love & Care (license # 10450) had the following deficiencies identified.

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on record review and interview the facility ensure Staff B has proof of a high school diploma.

Finding included:

Records revealed Staff B hired on as a manager of the facility. Staff B took the 26 hours of CORE training on but did not have proof of passing the CORE exam. Staff B also did not have proof of a high school diploma in her file.

On at 10:18 AM the Administrator acknowledged Staff B did not have documentation of her high school diploma in her file.

Class III

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review and interview the facility failed to ensure qualified staff had proof of a negative examination documented on an annual basis for one out of five (Administrator) sampled staff.

Findings included:

Record review found the Administrator's last physical examination form documented the or chest x-ray test date was and reading date . The examination for did not document if the Administrator's exam was positive or negative.

Interview on at 2:30 PM the Administrator stated she will have to contact the physician.

Class III

0083 - Training - First Aid and - 58A-5.0191(4) FAC

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966210	06/14/2018
NAME OF PROVIDER OR SUPPLIER **SAN JUDAS LOVE & CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **17715 NW 87 COURT** **MIAMI LAKES, FL 33018**	

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

Based on record review and interview the facility failed to ensure that for one out of five (D) sampled staff completed First Aid and training and that trained staff were in the facility at all times.

Findings included:

Observation on at 9:15 AM of the staff schedule found Staff D worked from 7:00 AM to 7:00 AM on Saturdays and Sundays alone. Review of the employee files found Staff D, hired on , did not have the First Aid and training on file for review.

On at 2:30 PM the Administrator acknowledged Staff D did not have the and First Aid training.

Class III

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

Based on observations, record review, and interview the facility failed to ensure that one out of five (D) received the initial training on providing assistance with self administered medications prior to assuming this responsibility.

Findings included:

Observation on at 9:15 AM of the staff schedule found Staff D worked from 7:00 AM to 7:00 AM on Saturdays and Sundays alone. Review of the employee files found Staff D, hired on , did not have documentation of the initial medication training. Review of the medication observation record revealed Staff D initialed the record each time medications were given from , 2018 to , 2018.

On at 11:43 AM Interview with Staff D, staff revealed she assisted the residents with medications.

On at 12:00 PM the Administrator stated, "Staff D assist the resident with medication or myself."

Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966210	**06/14/2018**
NAME OF PROVIDER OR SUPPLIER **SAN JUDAS LOVE & CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **17715 NW 87 COURT** **MIAMI LAKES, FL 33018**	

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

Based on record review and interview the facility failed have completed employment applications with references for three out of five (Administrator, Staff C and D) sampled staff.

Findings included:

Observations on . . . . at 9:15 AM found Staff D working at the facility. The Administrator arrived shortly after.

The staff schedule had the Administrator and D listed. Record review revealed staff the Administrator, Staff C and D did not have completed employment applications.

On . . . . at 2:40 PM the Administrator acknowledged the applications were not completed.

Class III