STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967867	R **08/06/2018**
NAME OF PROVIDER OR SUPPLIER **ANA'S ELDERLY CARE INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3720 SW 132 AVENUE** **MIAMI, FL 33175**	

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

0000 - Initial Comments

A Standard Biennial Survey Revisit was conducted on 08/03/18 & 08/06/18. Ana's Elderly Care Inc (License # 11873) had a deficiency identified at the time of the survey:

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

Based on record review and interview the facility failed to provide documentation that one of four sampled staff, hired after , 2018, had an initial 6 hours training in assistance with self-administration of medications (I).

Findings included:

Record review showed there was no documentation that Staff I received 6 hours training on providing assistance with self-administered medications and safe medication practices in an Assisted Living Facility.

Interviewed on at 11:00 AM, the Administrator stated that she received four hours medication training, but she was unable to provide documentation of it.

Uncorrected
Class III