

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967448	(X3) DATE SURVEY COMPLETED 09/20/2018
NAME OF PROVIDER OR SUPPLIER CHANEL NURSING CARE ALF, CORP	STREET ADDRESS, CITY, STATE, ZIP CODE 14111 SW 43 STREET MIAMI, FL 33175	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on 09/20/2018. Chanel Nursing Care Alf, Corp. (license # 11496) with limited nursing services and limited mental health components had a deficiency identified at the time of the survey:

0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC

Based on record review and interview the facility failed to provide adequate supervision for one out of six sampled residents (# 4) who sustained two falls at the facility.

Findings included:

Review of Resident # 4's record revealed that on 09/19/2018 she had a fall when she was sitting on the edge of the seat of her rolling walker and slipped and fell. On 09/20/2018 she had another fall; the floor was wet and she was told to be careful and when she was going out she slipped and fell; 911 was called and she was taken to the hospital with scratches on her elbow and knee.

A review of facility records and further review of the resident record showed no documentation between 09/19/2018 and 09/20/2018 of actions that would assist the resident in avoiding future falls. There was also no documentation after the second fall regarding plans to avoid future falls.

On 09/20/2018 the Administrator stated 1:12 PM that Resident # 4 had had two falls in 09/2018 and after them she never had another one.

Class III

0165 - Risk Mgmt & QA; Adverse Incident Report - 429.23(1-4 & 6-10) FS; 58A-5.0241 FAC

Based on record review and interview the facility failed to file with the agency a one-day incident report and a 15 days incident report for a resident that sustained a fall and had to be transferred to the hospital for further treatment (Resident # 4).

Findings included:

Record review of Resident # 4 revealed that on 09/20/2018 Resident # 4 had a fall when the floor was wet; 911 was called and she was taken to the hospital with scratches on her elbow and knee (does not

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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FORM APPROVED**

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specify which side). On Administrator stated 1:12 PM that she did not file the incident reports with AHCA. Stated she could not find the discharge papers from the hospital. Class III		