STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966210	R 10/09/2018
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) Revisit Survey was conducted on 9/19/18 and concluded on 10/09/18 at San Judas Love & Care (license # 10450). San Judas Love & Care had deficiencies identified at the time of the survey.

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 a one-day and a fifteen-day report with the agency, for one of six sampled resident (#1) that had a , was transferred to the hospital, and sustained a .

Findings included:

Interview on at 8:42 am Staff A stated, "Resident #1 went to the hospital on because Resident #1 ." Staff A stated, "Resident #1 was sitting on her bed, and she leaned forward and hit her right shoulder. Resident #1 came back to the facility next day; she had no ."

Record review revealed Resident #1's progress notes stated, " Resident #1 from her feet, she hit her right shoulder. X-ray was taken she has went to the hospital." It also stated, "Resident #1 come back today at 3:00 PM from ... hospital, she has a in his right shoulder. The family refused surgery. She has a sling for 4 week."

Review of the hospital record revealed, "The patient is an woman living at on ALF out of wheelchair day prior to presentation sent to the emergency department because of pain in right shoulder according to ALF personnel there was no head no loss of no other ." The medical history showed, " , right and left hip status post reduction and internal fixation.

Interview on at 9:15 am Resident #1's sister stated, "The facility called me to tell me that my sister . She was at the hospital, and she had a in her right shoulder. However, we refused to send her to surgery. She had medication and ."

Record review revealed Resident #1 (admitted on) had a health assessment dated with a diagnosis of , L THR , and R Fx. Physical or sensory Limitations as Memory decrease and concentration. Resident has universal precaution and needs assistance with ambulation, bathing, dressing, toileting and transferring. On previous health assessment dated on

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, Resident #1 reflected as precautions.

Interview on at 9:10 am Staff A stated, "I filled an incident report to AHCA, but I do not have the copy with me."

Class III