STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966809	R 11/07/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALF VILLA FRANCISCO HOME CARE CORP	**16832 SW 110 COURT** **MIAMI, FL 33157**

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

0000 - Initial Comments

A Standard Biennial Revisit Survey was conducted on 11/07/2018. ALF Villa Francisco Home Care Corp with Limited Mental Health component, had deficiencies at the time of the survey:

0162 - Records - Resident - 58A-5.024(3) FAC

Based on record review and interview, the facility failed to ensure that two out of seven sampled residents' records included a written informed consent for unlicensed staff to assist the residents with self-administration of medication (Resident #6 and #7).

Findings include:

Record review showed that for Resident #6 admitted on and for Resident #7 admitted on , the facility did not have documentation of the written informed consent for unlicensed staff assisting the residents with self-administration of medications.

Medication Observation Record review showed the facility assisted Resident #6 and #7 with their medications.

Interview conducted on at 11:45 AM, Administrator stated that she assisted Resident #6 and #7 with self-administration of medications.

Class III

0167 - Resident Contracts - 58A-5.025 FAC; 429.24 FS

Based on record review, and interview, the facility failed to have documentation of resident contract for three out seven (Resident #1, #6 and #7) sampled residents.

Findings include:

Record review showed that for Resident #1 admitted on , Resident #6 admitted on and Resident #7 admitted on there was no documentation of the contract with the residents.

Interview conducted on 11:45 AM, Administrator acknowledged that the facility did not have

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SUMMARY STATEMENT OF DEFICIENCIES
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documentation of Residents #1, #6 and #7 contracts.

Uncorrected
Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation and interview, the facility failed to obtain the required fuel at the facility to ensure that in the event of the loss of primary electrical power there is sufficient fuel readily available to maintain temperatures at or below 81 degrees for residents.

Findings include:

On at around !1:00 AM, no fuel was observed onsite as required.

On at 11:31 AM in an interview the Administrator stated she had no fuel on site. She stated she was not allowed to have any fuel onsite, as per the Fire Department.

Uncorrected
Class III

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SUMMARY STATEMENT OF DEFICIENCIES
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Z828 - Administrative Fines; Violations - 408.813(3) FS

Based on observation, record review, and interview the facility failed to obtain a licensure capacity increase prior to providing personal care and meals to a census of seven residents. The facility provided services to residents outside the current license capacity of six.

Findings included:

Observation on at 11:05 AM, showed that # had two beds and one couch for Resident #1, #2 and #3. Resident #1 was resting in the couch. # had two beds for Resident #6 and #7. # had two beds for Resident #3 and #4.

Medication Observation Record review showed the facility assisted seven residents with self-administration of medications.

Interview conducted on at 11:38 AM, Resident #1 stated, "I am sleeping in the couch located in #. and a new lady is sleeping in my bed."

Interview conducted on at 11:35 AM, Administrator confirmed that the facility had seven residents.

Unclassified