STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910977	**03/14/2019**
NAME OF PROVIDER OR SUPPLIER **LAS MERCEDES BOARDING HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **3418 SW 23RD TERRACE** **MIAMI, FL 33145**	

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

0000 - Initial Comments

A Complaint Survey (Complaint number 2019003257) was conducted on , , at Las Mercedes Boarding Home. Deficiencies were identified at the time of survey.

0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC

Based on observation and interview, the facility failed to keep all prescribed and over the counter medications locked at all times and away from the reach of all residents.

Findings included:

On , at 7:20 AM, observed an unlocked closet in the hallway with prescribed and over the counter medications: plus, 4 oz. Prescribed , for Resident 18 dated . Hydroconsone 10 mg. 12% cream for Resident 6 dated .

On , at 7:12 AM, observed the resident's medication closet unlocked and door semi-opened.

On , at 7:12 AM, Staff I stated, "Staff G left it opened, he is still giving medications."

Class III

0075 - Use of Personnel; Emergency Care ( ) - 429.255( ) FS

Based on observation and interview, the 39 licensed bed facility failed to have an Automated External Defibrillator ( ) on site.

Findings included:

On at 7:08 AM, during the tour of the facility, an was not observed.

On at 11:30 AM, when asked if an is available, the administrator stated that the previous administrator had "stolen both of them".

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910977	**03/14/2019**
NAME OF PROVIDER OR SUPPLIER **LAS MERCEDES BOARDING HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **3418 SW 23RD TERRACE** **MIAMI, FL 33145**	

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

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on record review and interview, the facility failed to maintain an updated roster of its staff within the Background Screening Clearinghouse database. Two of the current staff were no longer listed on the roster as active staff (Staff M and N).

Findings included:

Review of the facility's roster in the background screening clearinghouse database showed Staff M hire date [redacted] and end date [redacted]; Staff N hire date [redacted] and end date [redacted].
Review of the facility's staff schedule showed both staff scheduled to work.

On [redacted], [redacted] at 8:25 AM, Staff K stated, "Staff N comes on the weekends when we need her and Staff M works here at night."

Unclassified