STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968136	R **05/09/2019**
NAME OF PROVIDER OR SUPPLIER **LOVE OF HOPE ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2911 NW 174TH STREET** **MIAMI GARDENS, FL 33056**	

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

0000 - Initial Comments

A revisit to a limited nursing services expansion survey was conducted at Love of Hope ALF , Inc. on . Deficiencies were found to be uncorrected at the time of the survey.

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

Based on record review and interview the facility failed to have an accurate health assessment completed by healthcare provider for one out of four sampled residents Resident # 1).

Findings included:

Review of Resident #1's record revealed the health assessment completed on stated that the resident required assistance with activities of daily living and required medication administration. The health assessment did not reflect that the resident was under hospice care.

On at 9:38 AM the Administrator stated, "He is total care. The doctor put it there. That is the old form. I need the new one."

Uncorrected
Class III

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

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c); 59A-35.090(2)(d)-(3)

Based on record review and interview the facility failed to have a signed Attestation of Compliance with Background Screening for one out of three sampled staff (Staff C).

Findings Included:

Record review showed Staff C had no documentation of a signed Attestation of Compliance with Background Screening on file.

On . . . . . at 12:20 PM the Administrator stated, "I thought the attestation was only for the employer, for me. I will do it for her."

Uncorrected
Class III

Z824 - Right of Inspection; Inspection Reports - 408.811 FS; 59A-35.120 FAC

Based on record review and interview, the facility failed to correct deficiencies within 30 days of being notified by the Agency for Health Care Administration.

Findings:

Based on record review and interview, on , the facility was cited for deficient practices in the areas of resident records and background screening compliance attestation.

Record review and interview during a revisit inspection on . . . . . showed that the deficiencies had not been corrected.

Unclassified