STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965702	**05/14/2019**
NAME OF PROVIDER OR SUPPLIER **AMOR DE DIOS**	STREET ADDRESS, CITY, STATE, ZIP CODE **718 NW 132 PLACE** **MIAMI, FL 33182**	

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

0000 - Initial Comments

A 6th month monitoring was conducted at Amor de Dios on [redacted] through [redacted]. Deficiencies were identified at the time of survey.

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review, and interview, the facility failed to provide documentation of freedom from communicable [redacted] for one out of four (Staff D) sampled staff.

Findings included:

Staff record review revealed that Staff D's file, hired on [redacted], had no documentation verifying freedom from communicable [redacted].

On [redacted] at 11:25 AM, Staff B confirmed that Staff D's record did not have documentation of freedom from communicable [redacted].

Class III

0080 - Training - Core & Competency Test - 429.52( ) FS; 58A-5.0191(1) FAC

Based on record review, and interview, the facility's Administrator failed to provide documentation of 12 hours of continuing education in the last 2 years. The facility failed to provide documentation that the Administrator had retaken core training due to the lack of continuing education.

Findings included:

Record review showed the Administrator's received 12 hours of continuing education on [redacted] by a non-certified trainer and received 12 hours of continuing education on [redacted] but had invalid certificates. The signature on the certificates was not legible.

Interview conducted on [redacted] at 11:25 AM, Staff B stated the administrator received 12 hours of continuing education on [redacted] by the former facility's administrator. She confirmed that the documents signature was not legible.

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965702	**05/14/2019**
NAME OF PROVIDER OR SUPPLIER **AMOR DE DIOS**	STREET ADDRESS, CITY, STATE, ZIP CODE **718 NW 132 PLACE** **MIAMI, FL 33182**	

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

0081 - Training - Staff In-Service - 58A-5.0191( ) FAC

Based on record review, and interview, the facility failed to provide documentation of the required two hour pre-service orientation for one out of four (Staff D) sampled staff. The facility failed to provide documentation of the in-service training within 30 days of employment for two out of four (Staff C and D) sampled staff.

Findings included:

Staff record review showed that Staff C received the in-service training by a non-certified trainer. Staff C was hired on .

Staff D's record showed that there was no documentation of the minimum 2 hour required pre-service orientation. The record had invalid certificates as documentation of in-services training received. The signatures on the certificates was not legible. Staff D was hired on .

On at 11:25 AM, Staff B confirmed that Staff D's record did not have documentation of the minimum 2-hour required pre-service orientation and the signatures on the certificates were not legible.

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on record review and interview, the facility failed to have a current liability insurance.

Findings Include:

Facility's record review showed the liability insurance expired on .

On at 11:25 AM, Staff B confirmed that the liability insurance expired on .

Class III

0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965702	**05/14/2019**
NAME OF PROVIDER OR SUPPLIER **AMOR DE DIOS**	STREET ADDRESS, CITY, STATE, ZIP CODE **718 NW 132 PLACE** **MIAMI, FL 33182**	

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

Based on record review, and interview, the facility failed to ensure the staff records had documentation of the required Level 2 background screening results for one out of four (Staff D) sampled staff.

Findings included:

Review of Staff D's record showed no documentation of the level 2 background screening.

A review of the Agency's background screening database showed Staff D had an eligibility status dated

Interview conducted on at 11:25 AM, Staff B confirmed that Staff D's record did not have documentation of the level 2 background screening.

Class III