

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968821	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/04/2023
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

VIVO ALF INC

**14621 SW 10 ST
MIAMI, FL 33184**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments A re-licensure survey, with a limited mental health component, was conducted at Vivo ALF Inc. on . A deficiency was identified at the time of the survey.	A 000		
A 026 SS=F	59A-36.007(2) FAC Resident Care - Social & Leisure Activities (2) SOCIAL AND LEISURE ACTIVITIES. Residents shall be encouraged to participate in social, recreational, educational and other activities within the facility and the community. (a) The facility must provide an ongoing activities program. The program must provide diversified individual and group activities in keeping with each resident's needs, abilities, and interests. (b) The facility must consult with the residents in selecting, planning, and scheduling activities. The facility must demonstrate residents' participation through one or more of the following methods: resident meetings, committees, a resident council, a monitored suggestion box, group discussions, questionnaires, or any other form of communication appropriate to the size of the facility. (c) Scheduled activities must be available at least 6 days a week for a total of not less than 12 hours per week. Watching television is not an activity for the purpose of meeting the 12 hours per week of scheduled activities unless the television program is a special one-time event of special interest to residents of the facility. A facility whose residents choose to attend day programs conducted at adult day care centers, senior centers, mental health centers, or other day programs may count those attendance hours towards the required 12 hours per week of scheduled activities. An activities calendar must be posted in common areas where residents	A 026		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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NAME OF PROVIDER OR SUPPLIER VIVO ALF INC			STREET ADDRESS, CITY, STATE, ZIP CODE 14621 SW 10 ST MIAMI, FL 33184		
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A 026	Continued From page 1 normally congregate. (d) If residents assist in planning a special activity such as an outing, seasonal festivity, or an excursion, up to 3 hours may be counted toward the required activity time. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to provide social and recreational activities to the residents. The scheduled activity was not available to the residents. Findings: Observation on _____ at 7:30 am showed that the facility had posted a resident social and leisure activity calendar on a bulletin board in the living room. Review of the social and leisure calendar showed that domino games were scheduled to take place at 2:00 pm to 4:00 pm (Photographic evidence obtained) On _____ from 3:15 pm to 4:00 pm no social or leisure activities were observed. Interviewed on _____ at 3:15 pm Staff C stated that they did not play dominoes because the daycare resident was not there. Interviewed on _____ at 3:18 pm when asked why the scheduled activity was not taking place Staff B did not respond. Observation on _____ at 3:20 pm showed that Staff B brought Resident #1 from her room to the dining table and retrieved a domino game set from a cabinet.	A 026			

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A 026	Continued From page 2 Interviewed on _____ at 4:00 pm the Administrator stated that the residents did not want to play dominos or participate in activities and that she could not force the residents to participate. Class III	A 026		