Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11969196	A. BUILDING: _____ B. WING _____	09/19/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NENA'S ON THE LAKE, LLC	8140 NW 47TH CT LAUDERHILL, FL 33351

(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 An unannounced Relicensure and Generator Monitoring survey was conducted on at NENA'S ON THE LAKE ALF, LLC. The facility had a deficiency identified related to the Relicensure, and Generator Monitoring at the time of the survey.	A 000		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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CZ871	408.806(7)(d) FS Attempted Inspection (d) If a provider is not available when an inspection is attempted, the application shall be denied. This Statute or Rule is not met as evidenced by: Based on observation, and record review, the facility failed to have a Provider/Administrator available to grant access to the facility for state inspection survey (Relicensure survey). The findings include: On at 9 AM, the surveyor arrived to the facility to conduct the Relicensure and Generator monitoring survey (2nd attempt). The surveyor knocked on the door multiple times, no answer. The surveyor walked around the facility to determine if anyone was home, no persons were present. The surveyor contacted the facility at the listed number on at 9:05AM, 9:30AM and 9:45AM, all attempts were unsuccessful with no answer; voice message left. In addition to the survey made on , a survey attempt was also made on . This survey was also unsuccessful, no persons present at the facility. Surveyor unable to gain access to conduct the survey. Class III	CZ871		

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