

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 01/16/2014
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11967062	(X3) DATE SURVEY COMPLETED 01/14/2014
NAME OF PROVIDER OR SUPPLIER Fullness Of Love ALF	STREET ADDRESS, CITY, STATE, ZIP CODE 3405 Knolls Road Miramar, FL 33025	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:

0078-Staffing Standards - Staff-01/14/2014

Z815-Background Screening; Prohibited Offenses-01/14/2014

Specific Tag Findings:

0000-Initial Comments

An Assisted Living Facility biennial relicensure desk review revisit survey was conducted on 1/14/2014. Fullness of Love ALF, had no licensure deficiencies found at the time of the revisit.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

January 17, 2014

Administrator
Fullness Of Love ALF
3405 Knolls Road
Miramar, FL 33025

RE: Relicensure Survey Desk Review Revisit

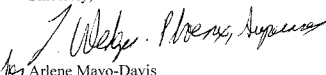
Dear Administrator:

This letter reports the findings of a state relicensure survey desk review revisit conducted on January 14, 2014 by a representative of this office. Attached is the provider's copy of the State Form (5000-3547), which indicates the previously cited deficiencies were found corrected on the day of the revisit. **You will not receive a copy of this report in the mail; you will only receive this faxed report.**

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,


for Arlene Mayo-Davis
Field Office Manager

AMD
Enclosure

