

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 01/30/2014
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11911052	(X3) DATE SURVEY COMPLETED 01/09/2014
NAME OF PROVIDER OR SUPPLIER Bernadette Aclf, Inc	STREET ADDRESS, CITY, STATE, ZIP CODE 520 Nw 2nd Avenue Hallandale, FL 33009	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0000 - - Initial Comments

Specific Tag Findings:

0000-Initial Comments

A closure monitoring visit was conducted on 1-9-14. The Bernadette ACLF undefined facility was in compliance during this visit.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

January 30, 2014

Administrator
Bernadette Acif, Inc
520 NW 2nd Avenue
Hallandale, FL 33009

Re: Closure Monitoring Visit

Dear Administrator:

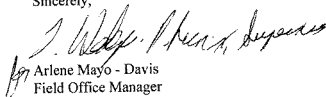
This letter reports the findings of an Unlicensed Activity survey that was conducted on December 11, 2013 through January 9, 2014, by a representative from this office.

Attached is the provider's copy of the State (3020) Form, which indicates the deficiencies that were identified on the day of the visit. When you received a Notice of Unlicensed Activity, it was expected that immediate action was taken to address that issue. Staff from this office will conduct a review to verify the necessary corrections are in place to correct the deficiencies identified on your survey.

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/jw
Enclosure

DUZQ

