

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11968366	(X3) DATE SURVEY COMPLETED 01/06/2015
NAME OF PROVIDER OR SUPPLIER De Jay's Adult Care, Llc	STREET ADDRESS, CITY, STATE, ZIP CODE 700 Nw 65th Avenue Plantation, FL 33317	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

0000-Initial Comments

An unannounced desk review follow-up to the Extended Congregated Care Services (ECC) monitoring survey was conducted on 01/06/15 at DeJay's Adult Care. The facility had no deficiencies found at the time of the visit.

List of Tags Cited:

St - A - 0000 - - Initial Comments

St - A - E205 - 58a-5.030(6) Fac - Ecc - Health Assessment S-S= D



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

January 13, 2015

Administrator
De Jay's Adult Care, LLC
700 NW 65th Avenue
Plantation, FL 33317

Re: Extended Congregated Care Services (ECC),
Monitoring Survey

Dear Administrator:

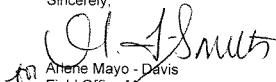
This letter reports the findings of a State Licensure Revisit Survey conducted on January 6, 2015 by representative from this office.

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.

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,


Arlene Mayo - Davis
Field Office Manager

AMD/jw
Enclosure

DT9D

Delray Beach Field Office
5150 Linton Boulevard, Suite 500
Delray Beach, FL 33484
Phone: (561) 381-5840; Fax: (561) 496-5924
AHCA.MyFlorida.com



Facebook.com/AHCAFlorida
Youtube.com/AHCAFlorida
Twitter.com/AHCA_FL
SlideShare.net/AHCAFlorida