

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11966189	(X3) DATE SURVEY COMPLETED 01/28/2015
NAME OF PROVIDER OR SUPPLIER Jennifer's Home Care, Inc.	STREET ADDRESS, CITY, STATE, ZIP CODE 7100 NW 76 Drive Tamarac, FL 33321	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:

0007-Admissions - Criteria-01/28/2015
 0008-Admissions - Health Assessment-01/28/2015
 0078-Staffing Standards - Staff-01/28/2015
 0084-Training - Assis Self-Admin Meds & Med Mgmt-01/28/2015
 0167-Resident Contracts-01/28/2015

Specific Tag Findings:

0000-Initial Comments

An unannounced follow-up to the licensure survey was conducted on 1/28/15. Jennifer's Home Care had no deficiencies found at the time of the visit.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

February 02, 2015

Administrator
Jennifer's Home Care, Inc.
7100 NW 76th Drive
Tamarac, FL 33321

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on January 28, 2015 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,


Ariene Mayo-Davis
Field Office Manager

AMD/dmb
Enclosure: State 5000-3547

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