

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 08/01/2016
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968978	(X3) DATE SURVEY COMPLETED 07/13/2016
NAME OF PROVIDER OR SUPPLIER INTEGRITY GROUP HOME CORPORATION	STREET ADDRESS, CITY, STATE, ZIP CODE 15025 MONROE ST MIAMI, FL 33176	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 Initial Comments

An initial licensure survey was conducted on 07/13/2016. No deficiencies were identified at the time of the survey.

Integrity Group Home Corp. met with the requirements for an ALF license. A recommendation will be sent to Tallahassee for an Initial Standard License with Limited Mental Health component, for 6 residents.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

August 1, 2016

Administrator
Integrity Group Home Corporation
15025 Monroe St
Miami, FL 33176

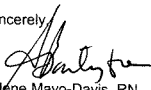
Dear Administrator:

This letter reports the findings of an initial Licensure survey conducted on July 13, 2016 by representative(s) of this office. Attached is the provider's copy of the State (5000-3547) Form, which indicates there were no discernible deficiencies noted on the date of the survey. **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 surveyor(s). Should you have any questions please call Sonia Bailey, Health Facility Evaluator Supervisor at (305) 593-3100.

Sincerely,



Arlene Mayo-Davis, RN
Field Office Manager

AMD/sb
Enclosure

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