STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953432	**09/02/2016**
NAME OF PROVIDER OR SUPPLIER **EDEN GARDENS ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **12221 WEST DIXIE HIGHWAY** **MIAMI, FL 33161**	

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

0000 Initial Comments

A Financial Monitoring Survey was conducted from August 24 through September 2, 2016. Eden Gardens ALF (AL8209) with Limited Mental Health component had deficiencies identified at the time of the survey; the deficiencies were cited under the Complaint Survey (NGYF11) and the Full Survey (VNPX11).