RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

, 2016

Administrator
Alelise Alf
6230 W 18 Avenue
Hialeah, FL 33012

Dear Administrator:

This letter reports the findings of a monitoring state licensure survey that was conducted on , 2016 by representative(s) of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. **Please attach a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents to the Field Office no later 6, 2016.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiencies identified on your survey, which may include a desk review or onsite 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 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
XG90

Miami Field Office
8333 N.W. 53rd Street, Suite 300
Miami, FL 33166
Phone:(305) 593-3100; Fax:(305) 593-3121
AHCA.MyFlorida.com

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966251	**11/10/2016**
NAME OF PROVIDER OR SUPPLIER **ALELISE ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **6230 W 18 AVENUE** **HIALEAH, FL 33012**	

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

0000 Initial Comments

A Monitoring Survey was conducted at on 11/10/16. Alelise ALF Corp with Limited Mental Health component, license #10469 had the following deficiencies identified at time of the survey:

0077 Staffing Standards - Administrators

Based on record review and interview the facility failed to appoint in writing a separate manager for each facility. The facility's Administrator supervised more than one facility.
Findings included:
Record review on / of staff files revealed the Administrator did not appoint a separate manager's for the facility
A review of the Florida health finder database showed the Administrator supervised two assisted living facilities.
During an interview on / /16 at 10:03 A.M., the Administrator acknowledged that she did appear as a manager of two facilities. She stated that she was a manager at the other facility for a short period of time and she is not any longer manager there. She stated I ' m contacting a manager from the other facility to verify if they did a change of administration. Facility administrator was unable to provide documentation of change of administrator at the second facility.
Class III

Z813 Results of Screening & Notification in File

Based on observation, record review and interview, the facility failed to maintain documentation of the results of a background screening on site in the facility's personnel record for one of three sampled staff (staff C).
Findings included:
A review of personnel records showed that Staff C did not have documentation of an eligible Level II background screening. The documentation status showed " awaiting privacy policy " .
A review of the Agency for Health Care Administration (AHCA) background screening database revealed, an eligible background screening for the Staff C dated /
During an interview on / / at 10:27 A.M. the Administrator acknowledged that staff C's background screening eligible result was not on record for review. She stated I can print it now if you want.
Documentation was not provided.
Unclassified