

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 02/21/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964927	(X3) DATE SURVEY COMPLETED 02/02/2017
NAME OF PROVIDER OR SUPPLIER RICHLAND RETIREMENT SENIOR HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 3508 SW 26 STREET MIAMI, FL 33133	

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

0000 - Initial Comments

An Abbreviated Biennial Survey was conducted on . Richland Retirement Senior Home (AL 9475) with standard license had the following deficiencies identified at the time of the survey:

0125 - Fiscal - Surety Bonds - 429.27(2) FS; 58A-5.021(3) FAC

Based on interview and record review, the facility failed to have a Surety bond for 4 out of 14 (Residents #11, #12, #13, #14) facility residents.

Findings as follow:

On at 2:00 p.m. the facility's administrator stated the facility received the social security benefits of Residents #11, #12, #13 and #14 directly to the facility's bank account, serving as a payee representative for those residents. The administrator also stated, that money is used to pay the facility on monthly basis. The facility's administrator stated the facility had no a surety bond for any of those mentioned residents.

Record review showed the facility had no proof of a surety bond filed for Residents # 11, #12, #13, #14.

Class III