

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/14/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967992	(X3) DATE SURVEY COMPLETED 02/14/2017
NAME OF PROVIDER OR SUPPLIER KENDALL ALF II, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 10230 SW 91 STREET MIAMI, FL 33176	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A Standard Biennial Survey was conducted on . Kendall ALF II Inc, license # 11974, had deficiencies found at the time of the survey: 0095 - Food Service - Contracted Food Service - 58A-5.020(4) FAC Based on observation, record review, and interview, the facility failed to have a contract with the food service company that was delivering resident meals. Findings included: Observation on at 9:15 AM showed the facility received lunch from a catering company. Facility record review showed that there was no catering contract in the facility at time of survey. Interviewed on at 1:00 PM, the Administrator stated that the facility has a catering contract but the document was not in the facility. Class III 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on record review and interview, the facility failed to review its emergency management plan on an annual basis and submit it to the county emergency agency for approval. Findings include: Observation and record review of the facility's posted Emergency Management Approval letter showed the facility's Emergency Plan was approved on . Interview conducted on at 1:00 PM, administrator stated that the facility submitted the emergency management plan but she has not received the approval letter. Class III		