STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11922174	**11/06/2017**
NAME OF PROVIDER OR SUPPLIER **LAURA'S ELDERLY HOMECARE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **19500 SW 127TH AVENUE MIAMI, FL 33177**	

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

0000 - Initial Comments

A Complaints Survey (CCR#2017010646) was conducted on and concluded , Laura's Elderly Homecare, Inc. with Limited Mental Health component license# 7992 had a deficiency found at the time of the survey:

0008 - Admissions - Health Assessment - 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on record review and interview the facility failed to have a face medical examination within 30 days of admission for 1 out of 5 sampled residents (Resident # 1).

Findings included:

Review of the admission / discharge log revealed that Resident # 1 was admitted on .

Review of Resident # 1 record revealed that there was no health assessment completed.

On at 11:00 AM according to the administrator he stated that for this resident, he has been asking the health assessment from the doctor since he was admitted and he did not know why the doctor has not given to the facility.

Class III