STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966913	R **11/07/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HARMONY FAMILY HOME CORP	**9245 SW 208 TERRACE** **MIAMI, FL 33189**

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

0000 - Initial Comments

A Wellness Monitoring Revisit was conducted on 11/07/2017. Harmony Family Home Corp. ,with a standard license (#11048) had the following deficiencies identified at the time of the survey:

0079 - Staffing Standards - Levels - 58A-5.019(3) FAC

Based on observation, record review, and interview, the facility failed to maintain an accurate staffing schedule.

Findings Included:

Record review showed the schedule posted on was from the month , /2017.

On at 10:28 AM, the Administrator stated, "I have a person that is keeping my paperwork and I will let her know to do an accurate staffing schedule."

Class III

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interview the facility failed to maintain a safe and clean living environment for six of six residents (Residents #1-6).

Findings Included:

On at 10:11 AM Observed outside on the patio that there was clutter consisting of of a metal fence, piles of broken wood, and broken bricks.

On at 10:15 AM Administrator stated "The tree when the hurricane hit, I do not know what to do about the fence, because I have been in the process of fixing it. I have done a lot to the patio and I am working on fixing the broken tiles."

Class III