

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/01/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969320	(X3) DATE SURVEY COMPLETED 02/07/2018
NAME OF PROVIDER OR SUPPLIER SHALOM ALF HOME LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 2570 NE 215TH ST MIAMI, FL 33180	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An Initial Licensure Survey was conducted On at Shalom ALF Home LLC. Deficient practice was identified during the survey. D152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC Based on observation and interview, the facility failed to provide a safe living environment free of hazards pursuant to Section 429.28(1)(a), F.S. Findings included: On at 08:50 AM during the facility's tour, the main entrance area had pieces of a Gazebo and other constructions equipment on the floor. Furthermore, the beds in all three (#1, 2, and 3) were not done. There was no sheets on the beds. Moreover, the backyard had three piles of work and debris from construction. During and interview on at 8:51 AM Staff A stated "the gazebo is for outside, I can move the pieces out now." He added this part is going to be framed in for the office." Staff A removed the Gazebo pieces from the entrance and place them in the front yagd area. Class III		