STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968092	R **02/06/2018**
NAME OF PROVIDER OR SUPPLIER **VANGELA'S ALF CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **789 NW 145 TERRACE** **MIAMI, FL 33168**	

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

0000 - Initial Comments

A Standard Biennial Survey Second Revisit was conducted on , 06, 2018. Vangela's ALF, Corp. (AL #12120) with Limited Nursing Services component had an uncorrected deficiency identified at the time of the survey:

0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC

Based on record review review and interview the facility's Administrator failed to provide documentation that she had completed the Core competency exam no later than 90 days after becoming the facility's Administrator.

Findings included:

Record review revealed Staff A had become the facility's Administrator on .

The facility's administrator stated on at 10:10 AM that she has an appointment for , 24th, 2018 to take the core examination.

Uncorrected Class III