

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/08/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967222	(X3) DATE SURVEY COMPLETED 02/26/2018
NAME OF PROVIDER OR SUPPLIER MGR HOME, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 5305 SW 137 CT MIAMI, FL 33175	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A Standard Biennial Survey was conducted on and concluded on MGR Home, Inc (License # 11295) had deficiencies found at time of survey: 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on record review and interview, the facility failed to have the annual Comprehensive Emergency Management Plan approval. Findings included: Review of facility's record revealed the Comprehensive Emergency Management Plan available for review was approved on The application was sent on and an electronic payment was done on for the amount of \$93.75. On at 8:51 A.M., The owner was inform that inform that Emergency Manager Plan letter was sent after the expiration date. Class III		

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Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on interview and record review, the facility failed to have 1 of 4 listed on the background screening's clearinghouse employee roster within 10 days of employment (Staff A).

Findings included:

On, at 9:44 A.M., Staff B stated, my daughter is the new Administrator.

Record review showed that the Administrator was hired on

The background screening database showed the facility's employee roster did not have Staff A listed as Administrator.

Unclassified