

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/16/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964101	(X3) DATE SURVEY COMPLETED R 04/02/2018
NAME OF PROVIDER OR SUPPLIER M & M COMPREHENSIVE	STREET ADDRESS, CITY, STATE, ZIP CODE 280 WEST 56 STREET HIALEAH, FL 33012	

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

0000 - Initial Comments

A Complaint (CCR# 2017012143) Second Revisit Survey was conducted on . . . 15, 2018 and concluded on . . . 2, 2018. M & M Comprehensive (License 8987) had the following deficiency identified on time of the survey:

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/16/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964101	(X3) DATE SURVEY COMPLETED R 04/02/2018
NAME OF PROVIDER OR SUPPLIER M & M COMPREHENSIVE	STREET ADDRESS, CITY, STATE, ZIP CODE 280 WEST 56 STREET HIALEAH, FL 33012	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS Based on observation, record review, and interview the facility failed to have an eligible background screening for one out of four (B) sampled staff. Findings included: On ... at 9:20 am, the facility's staff schedule included Staff B, who work from 7:00 am to 7:00 pm. The background screening database search on ... at 11:30 am revealed "A New Screening Is Required" for Staff B. Record review revealed Staff B's last background screening at the facility was dated ... Interview on ... Staff A stated, "Staff B's background screening is still valid and that it was going to expire next month." ... the background screening database confirmed that Staff B required a new background screening. Unclassified		