STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953246	**05/09/2018**
NAME OF PROVIDER OR SUPPLIER **MARIBEL PARADISE HOME INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **651 EAST 49 STREET** **HIALEAH, FL 33013**	

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

0000 - Initial Comments

An Abbreviated Biennial Survey was conducted on , , 2018. Maribel Paradise Home Inc. (license #8477) had the following deficiencies identified at time of the survey:

0026 - Resident Care - Social & Leisure Activities - 58A-5.0182(2) FAC

Based on record review and interview the facility failed to provide ongoing activities program to the residents.

Findings included:

Resident interview revealed on at 9:28 AM, "They don' have any activities."

Resident interview revealed on at 9:38 AM, "They don' have any activities because there are very little amount of people here."

Resident interview revealed on at 10:00 AM, "I do not participate in any activities. No programs."

Record review found the facility had an activities calendar.

Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on observation and interview the facility failed to have a 3-day supply of nonperishable food, based on the number of weekly meals the facility has contracted with residents to serve on hand at all times for a census of 5 residents.

Findings included:

Observation on at 9:20 AM during tour of the facility found the emergency food storage not have a sufficient supply of emergency food. There was 15 ounces vegetables, two cans of beans, one can of beets.

Interview on at 2:00 PM the Administrator stated, "I put them (emergency food) in the kitchen

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SUMMARY STATEMENT OF DEFICIENCIES
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Class III

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