

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968662	(X3) DATE SURVEY COMPLETED R 10/12/2018
NAME OF PROVIDER OR SUPPLIER KENDALL ALF 1 LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 9700 SW 106TH CT MIAMI, FL 33176	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A Standard Biennial Revisit Survey was conducted on 10/12/2018. Kendall ALF 1 LLC, License #12588, had the following deficiencies found at the time of the survey: 0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC Based on observation, record review, and interview, the facility failed to follow the meal plan/menu as required. The facility failed to document meal substitutions before or when lunch was served for 3 of 5 (Residents #2,#4, and #6) sampled residents. Findings Include: In an observation on _____ at 12:30 PM. Observed Resident #6 eating a bowl of chicken soup and a bologna sandwich. Observed Resident #4 eating chicken soup and fried chicken drumettes. Observed Resident #2 eating plantain soup. A record review revealed the menu for _____ as Fish or Tuna ; Rice; Beans; Sweet Fried Plantains; Mixed Salad & Dressings; and Pineapple Juice. No substitutions were noted. On _____ at 12:50 PM, the Owner stated that the menu was not followed because many of the residents' family members bring them food or they preferred different food than what was being provided by the ALF. She stated the menu is often not followed because residents won't eat at all if they could not have what they wanted or did not like what the ALF was serving. She acknowledged that menu changes were made all the time and these changes and substitutions were not readily documented. Class III 0160 - Records - Facility - 58A-5.024(1) FAC Based on record review, and interview, the facility failed to have a satisfactory annual fire inspection. Findings included: Observation on _____ at 12:30 PM showed a fire inspection dated _____ posted on the bulletin board.		

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 11/06/2018
FORM APPROVED

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On at 12:50 PM, the Owner stated that the facility had a current fire inspection but she was unable to provide the documentation at the time of the survey. Class III 0162 - Records - Resident - 58A-5.024(3) FAC Based on observation, record review, and interview, the facility failed to have an accurate health assessment for one out six (Resident #2) sampled residents. Findings include: Observation on at 12:30 PM showed Resident #2 eating pureed food. A review of Resident #2's health assessment dated indicated the resident needed low salt diet. On at 1:00 PM, the Owner stated Resident's #2 family brought him lunch. Class III		