STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967871	R **01/23/2019**
NAME OF PROVIDER OR SUPPLIER **PETSHIRL GROUP HOME, INC.**	STREET ADDRESS, CITY, STATE, ZIP CODE **8361 N E 3RD AVENUE** **MIAMI, FL 33138**	

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

0000 - Initial Comments

A financial monitoring second revisit survey was conducted on 01/23/2019. Petshirl Group Home, Inc. with Limited Mental Health component did not have deficiencies identified at the time of the survey.