RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

October 26, 2016

Administrator
Paradise Villa Retirement Home Iv At Pembroke Pine
1145 Nw 92nd Avenue
Pembroke Pines, FL 33024

Dear Administrator:

This letter reports findings of a State Licensure Survey that was conducted on October 12, 2016 by a representative from this office. Attached is the provider's copy of the State (5000-3547) Form, which indicates there were no discernible deficiencies noted on the date of the survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo - Davis
Field Office Manager

AMD/jw
Enclosure

1GGN

Delray Beach Field Office
5150 Linton Boulevard, Suite 500
Delray Beach, FL 33484
Phone:(561) 381-5840; Fax:(561) 496-5924
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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966313	**10/12/2016**
NAME OF PROVIDER OR SUPPLIER **PARADISE VILLA RETIREMENT HOME IV AT PEMBROKE PINE**	STREET ADDRESS, CITY, STATE, ZIP CODE **1145 NW 92ND AVENUE** **PEMBROKE PINES, FL 33024**	

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

0000 Initial Comments

An unannounced standard survey was conducted on 10/12/2016 at Paradise Villa Retirement Home IV (License #11931). The facility had no deficiencies found at the time of the visit.