

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11911401	(X3) DATE SURVEY COMPLETED R 05/21/2019
NAME OF PROVIDER OR SUPPLIER VILLA SERENA VII	STREET ADDRESS, CITY, STATE, ZIP CODE 3319 SW 24 TERRACE MIAMI, FL 33145	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A 3rd revisit to a complaint (#2018015981) survey was conducted at Villa Serena VII on Deficient practice was identified at the time of the survey. 0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC Based on observation and interview, the facility failed to have their menu posted. Findings included: Observation on at 9:35 AM showed the menu posted on their bulletin board belonged to a different facility. Lunch observation on at 12:05 PM showed 11 residents were sat down in the dining table and served a plate of 4 oz of stewed chicken, 1 cup of white rice, . . . cup of black beans, and 1 packet of cookies. There was no serving of any sort of vegetables included. On at 10:52 AM, Staff F stated that she did not know why the correct menu for the facility was not posted. She explained that she would speak to the administrator to get a new menu printed. On at 12:10 PM, Staff D explained that she did not have any vegetables to cook or prepare for the meal. Uncorrected Class III		