

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967960	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/30/2020
NAME OF PROVIDER OR SUPPLIER HIBISCUS PALACE WELLINGTON LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 1074 C/D HYACINTH PLACE WELLINGTON, FL 33414		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	
A 000	Initial Comments An unannounced Generator Assessment Monitoring survey was conducted on _____ at Hibiscus Palace Wellington LLC. The facility had a deficiency at the time of the survey.	A 000		
A 181 SS=C	59A-36.019(2) FAC Emergency Plan Approval (2) EMERGENCY PLAN APPROVAL. The plan must be submitted for review and approval to the local emergency management agency. (a) If the local emergency management agency requires revisions to the emergency management plan, such revisions must be made and the plan resubmitted to the local office within 30 days of receiving notification that the plan must be revised. (b) A new facility as described in rule 59A-36.014, F.A.C., and facilities whose ownership has been transferred, must submit an emergency management plan within 30 days after obtaining a license. (c) The facility must review its emergency management plan on an annual basis. Any substantive changes must be submitted to the local emergency agency for review and approval. 1. Changes in the name, address, telephone number, or position of staff listed in the plan are not considered substantive revisions for the purposes of this rule. 2. Changes in the identification of specific staff must be submitted to the local emergency management agency annually as a signed and dated addendum that is not subject to review and approval. (d) The local emergency management agency is the final administrative authority for emergency management plans prepared by assisted living facilities. (e) Any plan approved by the local emergency	A 181		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X8) DATE

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

HIBISCUS PALACE WELLINGTON LLC

**1074 C/D HYACINTH PLACE
WELLINGTON, FL 33414**

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A 181	Continued From page 1 management agency is considered to have met all the criteria and conditions established in this rule. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to provide evidence of the Comprehensive Emergency Management Plan (CEMP), which reflected the Change in Ownership. The findings included: On at 09:20 AM, an interview was conducted with the Administrator. She was requested to provide evidence of the CEMP approval letter for the change of ownership which took place in The Administrator provided a letter dated, which indicated the CEMP submitted to the Emergency Management Agency had been rejected. The surveyor discussed the rejection letter with the Administrator and the additional information required before the approval letter would be issued. At this time, the Administrator indicated that she was sure that she had received an approval letter recently but she could not locate the letter at this time. On at 02:04 PM, an email was received from the Representative of the local county Emergency Management Division. He wrote the following: "The facility does not have an approved CEMP. The last approval expired ..". This approval would have been for the previous owners. However, the facility had a Change of Ownership in warranting a newly approved CEMP due to this substantial change. On at 05:19 PM, an email was	A 181		

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A 181	Continued From page 2 received from the Administrator. She wrote the following: "Unfortunately my search has turned up empty. Which appears to be an oversight on my part, as I was certain that I had received an approval ahead of time, but my records only shows approval for the other facility. Thank you for your patience with me today. I can accept that a citation is in order." Class III	A 181		