

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967714	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 03/08/2022
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

ROCKWELL SENIORS INC

**22198 EISENADAY WY
BOCA RATON, FL 33433**

(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)	(X5) COMPLETE DATE
{A 000}	Initial Comments An unannounced revisit to the Generator Monitoring survey was conducted on 03/08/2022 at Rockwell Seniors Inc. The deficiency remained uncorrected at the time of the survey.	{A 000}		
{CZ830}	408.821 FS Emergency Management Planning 408.821 Emergency management planning; emergency operations; inactive license.- (1) A licensee required by authorizing statutes and agency rule to have a comprehensive emergency management plan must designate a safety liaison to serve as the primary contact for emergency operations. Such licensee shall submit its comprehensive emergency management plan to the local emergency management agency, county health department, or Department of Health as follows: (a) Submit the plan within 30 days after initial licensure and change of ownership, and notify the agency within 30 days after submission of the plan. (b) Submit the plan annually and within 30 days after any significant modification, as defined by agency rule, to a previously approved plan. (c) Submit necessary plan revisions within 30 days after notification that plan revisions are required. (d) Notify the agency within 30 days after approval of its plan by the local emergency management agency, county health department, or Department of Health. (2) An entity subject to this part may temporarily exceed its licensed capacity to act as a receiving provider in accordance with an approved comprehensive emergency management plan for up to 15 days. While in an overcapacity status, each provider must furnish or arrange for appropriate care and services to all clients. In	{CZ830}		

AHCA Form 3020-0001

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

TITLE

(X6) DATE

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{CZ830}	Continued From page 1 addition, the agency may approve requests for overcapacity in excess of 15 days, which approvals may be based upon satisfactory justification and need as provided by the receiving and sending providers. (3)(a) An inactive license may be issued to a licensee subject to this section when the provider is located in a geographic area in which a state of emergency was declared by the Governor if the provider: 1. Suffered damage to its operation during the state of emergency. 2. Is currently licensed. 3. Does not have a provisional license. 4. Will be temporarily unable to provide services but is reasonably expected to resume services within 12 months. (b) An inactive license may be issued for a period not to exceed 12 months but may be renewed by the agency for up to 12 additional months upon demonstration to the agency of progress toward reopening. A request by a licensee for an inactive license or to extend the previously approved inactive period must be submitted in writing to the agency, accompanied by written justification for the inactive license, which states the beginning and ending dates of inactivity and includes a plan for the transfer of any clients to other providers and appropriate licensure fees. Upon agency approval, the licensee shall notify clients of any necessary discharge or transfer as required by authorizing statutes or applicable rules. The beginning of the inactive licensure period shall be the date the provider ceases operations. The end of the inactive period shall become the license expiration date, and all licensure fees must be current, must be paid in full, and may be prorated. Reactivation of an inactive license requires the prior approval by the agency of a	{CZ830}			

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{CZ830}	Continued From page 2 renewal application, including payment of licensure fees and agency inspections indicating compliance with all requirements of this part and applicable rules and statutes. (4) . . . Licensees providing residential or inpatient services must utilize an online database approved by the agency to report information to the agency regarding the provider's emergency status, planning, or operations. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to submit its revised Comprehensive Emergency Management Plan (CEMP) to the local emergency management agency. The facility's CEMP must also contain the facility's Emergency Environmental Control Plan (EECP) as a supplement, to ensure the facility's alternate power source is capable of maintaining the facility's air temperature at or below 81 degrees Fahrenheit in the event of the loss of primary electrical power. The findings included: In an observation conducted in the facility's garage on at 12:25 PM, there was a portable power generator which indicated that it had 9200 running watts of power. In an interview conducted with the Administrator at this time, she stated that this power generator was brought from another facility and this was not the power generator described in the facility's original EECP dated She stated that she was not aware if this power generator was capable of running the facility's central air conditioning unit to maintain the facility's air temperature at or below 81 degrees Fahrenheit in the event of the loss of primary electrical power.	{CZ830}		

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{CZ830}	Continued From page 3 Review of the facility's "Generator Policy and Procedures" dated revealed that there was no representation that the facility was presently using a portable power generator with a capacity of 9200 running watts of power which was capable of maintaining the facility's air temperature at or below 81 degrees Fahrenheit in the event of the loss of primary electrical power. Review of the facility records revealed that it's most recent CEMP was submitted for approval to the local emergency management agency on and it was not approved. Further review of the local emergency management agency's letter dated revealed that the facility did not include an updated EECp. In an interview conducted with the Administrator on at 1:10 PM, she stated that she did not have an approved CEMP or EECp to represent that the facility's current portable generator was capable of maintaining the facility's air temperature at or below 81 degrees Fahrenheit in the event of the loss of primary electrical power. Class III	{CZ830}		