Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11968292	A. BUILDING: _____ B. WING _____	10/21/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EL RENACER DE ANA INC	5900 NW 7 STREET MIAMI, FL 33126

(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 A Complaint Investigation number 2022014425 was conducted at El Renacer De Ana, Inc. on , , to . Deficiencies were identified at the time of the investigation.	A 000		
A 181 SS=D	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		

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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 record review and interview, the facility failed to provide an approved Comprehensive Emergency Management Plan (CEMP) and an Emergency Power Plan (EPP), after the facility was requested by the local authorities to make changes to its current plan within the required timeframe. Findings included: Review of the facility's records showed the approved CEMP dated for year 2021, and approved EPP dated . The documents showed a CEMP application submitted for year 2022 on . On , at 12:10 PM, the Administrator stated, "We are in the process of changing the switch for the generator. We already submitted the plans. The application/permit number is here." The administrator provided the document. On , at 10:33 AM, during a phone interview with local authorities, the representative stated, "They are not in compliance with the CEMP, there are some issues that the facility has with the [local building department]" On , at 3:50 PM, during a phone interview with the local building department, the representative stated, "The application was received on , and on the	A 181		

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A 181	Continued From page 2 contractor requested to add an electrical contractor; the plans are approved, but the inspectors have not done any inspections yet, the permit is still in process." On . at 4:04 PM, the administrator acknowledged the deficiency. Class III	A 181		