STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966234	R **06/18/2018**
NAME OF PROVIDER OR SUPPLIER **NEW HORIZON OF TAMARAC**	STREET ADDRESS, CITY, STATE, ZIP CODE **7106 NW 84TH STREET** **TAMARAC, FL 33321**	

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

0000 - Initial Comments

An unannounced Relicesnure revisit survey was conducted on [redacted] at New Horizon of Tamarac (Lic#10474). The facillity had one uncorrected deficiency at the time of the visit.

0181 - Emergency Plan Approval - 58A-5.026(2) FAC

Based on record review and interview, the facility failed to ensure that an annual Comprehensive Emergency Management Plan (CEMP) application was submitted and reviewed for approval.

The findings included:

On [redacted] at 10:10AM, an attempt was made to review the facility's submission and approval of the CEMP for 2018. On [redacted] at 10:35AM, during an interview with the Administrator she stated, she submitted the plan for approval, however she misfiled the receipt. On [redacted] at approximately 10:40AM, the surveyor spoke to a representative from the Broward County Emergency Management Division, who verified the CEMP was submitted on [redacted]; however, the plan has not been reviewed and no time frame was given as to when the plan would be reviewed.

On [redacted] at 10:50PM, an interview was conducted with the facility Administrator. The Administrator submitted the plan when she did, due to trying to get a extension for the generator rule. She acknowledged the findings and and provided no additional documentation for review.

Class III