STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965021	R **07/20/2018**
NAME OF PROVIDER OR SUPPLIER **GARDENS AT MAPLEWOOD (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **1342 NW 104TH DRIVE** **CORAL SPRINGS, FL 33071**	

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

0000 - Initial Comments

A Relicensure revisit survey was conducted by desk review on and for Gardens at Maplewood (The), License #9451. The outstanding deficiency was not corrected.

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

Based on record review and interview, the facility failed to provide evidence of completion for their Comprehensive Emergency Management Plan (CEMP).

The findings included:

On , the surveyor requested a copy of the Comprehensive Emergency Management Plan, the CEMP was not available. During an interview with the Administrator, on at 3:40 PM, she reported that the CEMP was submitted in , 2018, and she is awaiting an approval letter. At this time the Administrator acknowledged the findings.

Class III