STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967860	R **07/26/2018**
NAME OF PROVIDER OR SUPPLIER **MIAMI COMFORT COVE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3511 N W 11 COURT** **MIAMI, FL 33127**	

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

0000 - Initial Comments

A Complaint (CCR#2018008172) revisit survey was conducted on . . . . . Miami Comfort Cove, Inc. (license #11869) had a deficiency found at the time of the survey:

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SUMMARY STATEMENT OF DEFICIENCIES
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0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on record review and interview the facility failed to provide documentation of an approved Emergency Power Plan (EPP) from the local agency.

Findings included:

Record review revealed the facility did not have an approved Emergency Power Plan available for review.

On . . . . . at 1:00 PM the Administrator stated that she submitted the application on . . . and they are still waiting for the letter.

Class III