STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965888	**07/25/2018**
NAME OF PROVIDER OR SUPPLIER **MARY'S ON BAYSHORE**	STREET ADDRESS, CITY, STATE, ZIP CODE **441 Bayshore Drive** **VENICE, FL 34285**	

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

0000 - Initial Comments

An unannounced emergency power plan monitoring visit was conducted on at Mary's on Bayshore, an assisted living facility (license #10200) in Venice, Florida.

The following is description of the deficiencies.

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on interview and record review the assisted living facility (ALF) failed to comply with the following regulatory requirements related to the environmental control plan: a. Developing a policy and procedure to ensure the facility could safely operate in the event of the loss of primary power; b. Obtain and install a monoxide detector; c. Obtain an onsite alternate power source; and d. Notify residents and their representatives in writing of the implementation of the emergency plan.

The findings included:

On at 12:15 p.m., an interview was conducted with the administrator who said that she did not notify her residents nor their representatives in writing of the implementation of the emergency plan and that the policy and procedure was "in process."

On at 12:25 p.m., a facility tour revealed that the facility did not have a monoxide detector onsite. The tour observation also revealed the facility did not have an onsite alternate power source.

On at 12:34 p.m., an interview was conducted with the administrator who said, the facility did not have a monoxide detector available onsite. The administrator also said that the facility generator was not located onsite.

Class III