STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967491	09/05/2018
NAME OF PROVIDER OR SUPPLIER **SUAREZ RESIDENT INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **13371 SW 50 STREET** **MIAMI, FL 33175**	

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

0000 - Initial Comments

A generator monitoring survey was conducted on , , , 2018. Suarez Resident, Inc. with a standard license (#11531) had the following deficiency identified at the time of survey:

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, record review and interview the facility failed to acquire and maintain at the facility, a sufficient alternate power source such as a generator. The facility failed to store the minimum amounts of fuel supply (48 hrs.) on the property in accordance with local zoning and the Florida Building Code. The facility failed to provide a detailed written policies and procedures to serve as a supplement to its Comprehensive Emergency Management Plan (CEMP) that should be available for inspection by each resident or each resident's legal representative. The facility failed to notify within 5 business days in writing each resident and the resident's legal representative of the existence of the equipment. The facility failed to provide proof of monoxide detectors.

Findings included:

Review of the health finder database showed that the facility's generator implementation date was 01, 2018.

On , , 2018 at 7:30 AM, observed a locked shed outside on the backyard of the facility. The facility did not have a generator on-site. Further observations found the facility did not have a monoxide detector inside the facility.

On , , 2018 at 9:20 AM, observed two men entering the facility with big boxes, one was a generator and the other two were portable air conditioners. The men took the boxes to the backyard of the facility.

On , , 2018 at 9:20 AM, the Administrator stated, "You wanted to see the generator, so I asked them to bring it, to tell you the truth, I had it in my house, I have until to install it; my husband is doing all that."

Record review of the facility showed no proof of written policies and procedures. Record review of all residents showed no written notice of equipment.

On , , , 2018 at 10:05 AM, the Administrator stated, "I will put it in writing and ask them to sign

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it. I will also write the procedures and policies and will keep them on file."

On , , 2018 at 10:05 AM, the Administrator acknowledged that the facility was in need of the required monoxide detectors. She also stated, "The gasoline is inside the shed, my husband has the key."

Class III