

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 12/06/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969176	(X3) DATE SURVEY COMPLETED R 11/14/2018
NAME OF PROVIDER OR SUPPLIER THE HOUSE OF CARES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1042 HALEYBERRY AVE PORT SAINT LUCIE, FL 34953	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced licensure complaint revisit survey to CCR# 2018007865 was conducted on and, as a desk review for The House of Cares Inc, license number 13021. The facility had uncorrected deficiencies identified at the time of the revisit survey. 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on record review and interview, the facility continued to fail to obtain the required approval of their Comprehensive Emergency Management Plan (CEMP) from the local authority. This has the potential to affect all current residents of the facility. The findings included: a) During interview and record review conducted with the Administrator, on beginning at approximately 12:10 PM, she was provided the opportunity to locate this facility's CEMP (Comprehensive Emergency Management Plan) approval letter from the County Emergency Management authorities. She provided a CEMP, dated, that was stamped by the local Fire Marshal's office on, The Administrator stated she hired a consultant to keep her up-to-date on regulations and that she was not made aware that the CEMP had to be submitted to the County Emergency Management authorities. b) Review of the facility's CEMP was conducted on at 9:05 AM. Unsuccessful attempts to reach the facility Administrator or other staff, by telephone, were made on at 9:10 AM, 10:56 AM and 10:57 AM; messages were left. However, at the time of writing this report, no telephone interviews were able to be conducted. In a telephone interview conducted on at 9:06 AM, a representative of the Emergency Management Division verified this facility did not have a current approved CEMP on file. She stated their office sent the facility a letter listing required revisions to their CEMP on To-date, no response has been received. The facility continues to not be in compliance with this Florida Administrative Code rule. Class III Uncorrected Deficiency		

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0200 - Emergency Environmental Control - 58A-5.036 FAC Based on record review and interview, the facility continued to fail to obtain the required approval of their Emergency Environmental Control Plan (EECP) from the local authority. This has the potential to affect all current residents of the facility. The findings included: a) During interview conducted with the Administrator, on _____ beginning at approximately 12:10 PM, she was asked for an approval letter or extension for the facility's EECP (Emergency Environmental Control Plan). The Administrator stated she has a consultant that is supposed to keep her up-to-date on regulations and that she (the Administrator) was not aware she had to have an EECP. She acknowledged this facility does not have any policies and procedures related to the EECP and has not submitted any plan or extension letter. b) Review of the facility's EECP was conducted on _____ at 9:05 AM. Unsuccessful attempts to reach the facility Administrator or other staff, by telephone, were made on _____ at 9:10 AM, 10:56 AM and 10:57 AM; messages were left. However, at the time of writing this report, no telephone interviews were able to be conducted. In a telephone interview conducted on _____ at 9:06 AM, a representative of the Emergency Management Division verified they have yet to receive the facility's EECP for review. She stated on _____, they sent the facility a letter stating their EECP had not yet been received. To-date, no response has been received. The facility continues to not be in compliance with this Florida Administrative Code rule. Class III Uncorrected Deficiency		