

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/03/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964863	(X3) DATE SURVEY COMPLETED R 12/18/2018
NAME OF PROVIDER OR SUPPLIER HIBISCUS COURT	STREET ADDRESS, CITY, STATE, ZIP CODE 540 EAST HIBISCUS BLVD. MELBOURNE, FL 32901	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A revisit to the re-licensure survey was conducted on Hibiscus Court, license #9309, had deficiencies at the time of the visit. 0181 - Emergency Plan Approval - 58A-5.026(2) FAC DEFICIENCY REMAINED UNCORRECTED Based on interview, the facility failed to have documentation of the Comprehensive Emergency Management Plan (CEMP) approval letter as required annually by the county Office of Emergency Management (OEM). Findings: On at 12:30 PM, the Administrator stated she was still waiting for the CEMP approval letter from the county OEM Class III 0200 - Emergency Environmental Control - 58A-5.036 FAC DEFICIENCY REMAINED UNCORRECTED Based on interview, the facility failed to have documentation of the Emergency Power Plan (EPP) approval letter as required annually by the county Office of Emergency Management. Findings: On at 12:30 PM, the Administrator stated she was still waiting for the EPP approval letter from the county OEM Class III		