

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964521	(X3) DATE SURVEY COMPLETED R 01/08/2019
NAME OF PROVIDER OR SUPPLIER RAINBOW PLACE, INC.	STREET ADDRESS, CITY, STATE, ZIP CODE 522 SOUTH RAINBOW DRIVE HOLLYWOOD, FL 33021	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced monitoring revisit inspection survey was conducted on 01-08-2019. The facility had an uncorrected deficiency identified at the time of the survey. 0200 - Emergency Environmental Control - 58A-5.036 FAC Based on observation, record review and interview, the facility failed to acquire sufficient fuel for its power generator to maintain a facility ambient temperature at or below 81 degrees Fahrenheit for at least 48 hours after electrical power loss during a state of emergency. The findings are: In an observation on 1-8-19 at 12:10pm, there was an 8,000 watt portable power generator and seven empty 5-gallon fuel containers stored in the rear patio, located on the north side of facility's property. In an observation on 1-8-19 from 12:10pm to 1:15pm, there were no other fuel containers or aluminum fuel storage compartments in the facility. In an interview with the the caregiver on 1-8-19 at 12:15pm, she stated that she was presently the person in charge at the facility and that she did not know the specific steps she needed to take to acquire fuel for the facility's power generator so she may immediately start the portable power generator in an event of the loss of primary electrical power to the facility. She stated that the assistant administrator was not presently in the facility and she will have to rely on the assistant administrator being onsite to implement the steps necessary to achieve operating the portable power generator. In an interview with the assistant administrator on 1-8-19 at 12:25pm, she stated that the facility recently submitted a revised comprehensive emergency management plan (CEMP), which contained a revised emergency environmental control plan, to the local emergency management agency. She stated that the facility received a notice from the local emergency management agency after they received the facility's revised CEMP and the local emergency management agency did not completely approve the facility's revised CEMP. She stated that the seven 5-gallon fuel containers stored in the rear patio did not have any fuel inside of them and there were no other fuel containers stored in the facility. She stated that she was not able to operate the portable power generator without the assistance of a family member because she was injured and could not physically handle initiating the process to operate the portable power generator. She stated that the family member she needed for assistance with handling the portable power generator was not an employee of the facility.		

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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FORM APPROVED

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Review of the facility's approved CEMP dated on 8-7-18 indicated that the facility needed to keep enough fuel stored onsite to operate the power generator for 168 hours inside a locked aluminum fuel storage compartment so as for the power generator to power the facility's spot cooler and window air conditioning unit. Further review of the CEMP indicated that the administrator was to ensure that the total supply of fuel as described be immediately available in the facility. Review of the facility documentation during this inspection on 1-8-19 indicated that the was no other document to represent that the CEMP was subsequently revised and approved by the local emergency management agency. In an interview with the assistant administrator on 1-8-19 at 12:45pm, she stated that the facility did not maintain any fuel onsite so it can start and operate the portable power generator for any period of time, in case of an electrical power loss during a state of emergency. She stated that the spot cooler described to be the facility's cooling method during an event of emergency in the CEMP was also not kept onsite because she kept this spot cooler in her private residence. She stated that she could not provide a copy of the revised CEMP, a copy of the revised supplemental emergency environmental control plan, or the most recent notice from the local emergency management agency for review by the facility staff or the Agency for Health Care Administration. Class III Uncorrected		