STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968748	**01/08/2019**
NAME OF PROVIDER OR SUPPLIER **PINEAPPLE GARDEN, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1504 FISKE BLVD** **ROCKLEDGE, FL 32955**	

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

0000 - Initial Comments

An unannounced monitoring visit related to emergency environmental control planning was conducted on . . . . Pineapple Garden (license #12582) had a deficiency at the time of the visit.

0181 - Emergency Plan Approval - 58A-5.026(2) FAC

Based on interview and record review, the facility failed to submit a Comprehensive Emergency Management Plan (CEMP) for approval by Brevard County.

Findings:

During the review of records on . . . . , . . , ... at approximately 2:00 pm, the CEMP approval letter was requested. The facility produced a plan but no evidence of an approval or submittal was available for review.

Class III