

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/20/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969134	(X3) DATE SURVEY COMPLETED 02/20/2019
NAME OF PROVIDER OR SUPPLIER CAIRN PARK 4	STREET ADDRESS, CITY, STATE, ZIP CODE 1433 SE 30TH TERR CAPE CORAL, FL 33904	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced emergency power plan monitoring survey was conducted at Cairn Park 4, an assisted living facility (license #12977) in Cape Coral, Florida. The following is description of the deficiency. 0200 - Emergency Environmental Control - 58A-5.036 FAC Based on record review and interview, the facility failed to obtain an approved emergency power plan approved from the local emergency management agency and failed to develop written policies and procedures to ensure facility staff can effectively and immediately activate, operate and maintain the alternate power source. The findings included: On at 10:15 a.m., the Administrator contacted the owner for a copy of the approved emergency power plan. On at 10:39 a.m., the Administrator said she'd received a reply from the owner indicating they do not have a final plan yet. The owner said the local emergency management agency had requested further information. On at 11:04 a.m., the Administrator said there were currently no written policies and procedures for operating the generator and also, since no residents are in residence, there had been no written notification to residents/legal representatives the plan had been submitted for review and approval. Class III		