

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/28/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968030	(X3) DATE SURVEY COMPLETED 03/06/2019
NAME OF PROVIDER OR SUPPLIER VILLA MARGO VIII	STREET ADDRESS, CITY, STATE, ZIP CODE 2256 SW 16TH AVE MIAMI, FL 33129	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An Abbreviated Biennial Survey was conducted on Villa Margo VIII, Inc. with a standard license had the following deficiency identified at the time of survey: 0200 - Emergency Environmental Control - 58A-5.036 FAC Based on observation, record review, and interview, the facility failed to submit the summary of the emergency plan to the agency. The facility did not implement the plan by the extension given of Findings included: On at 7:45 AM, observed at the facility a portable generator, 70 gallons of gasoline and a monoxide detector. Review of the facility's record in the system showed the facility had an extension to implement the plan by On, the owner of the facility stated they had the approval by the local authorities but did not send the application to the agency. Class III		