

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969223	(X3) DATE SURVEY COMPLETED R 03/29/2019
NAME OF PROVIDER OR SUPPLIER PALLISER ASSISTED LIVING LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 9536 OLD PINE RD BOCA RATON, FL 33428	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced revisit to licensure complaint survey, CCR #2018016407, was conducted on _____ at Palliser Assisted Living, LLC, License #13052. The facility had uncorrected deficiencies identified at the time of the survey. 0026 - Resident Care - Social & Leisure Activities - 58A-5.0182(2) FAC Based on observation and interview, the facility failed to ensure that the facility has at least six (6) days a week, for a total of not less than 12 hours per week of scheduled activities for residents. And that an activities calendar was posted in common areas where residents normally congregate. The findings included: Observational Tour of the facility at 9:30 AM on _____ revealed no activity calendar posted for the residents in any conspicuous areas or in any areas where the residents congregate. During an interview with Staff A and the Administrator at 9:53 AM on _____, it was stated that I left the activity calendar in my truck yesterday and forgot to leave it at the facility yesterday when I was there. The findings were discussed and acknowledged, no further information was provided for review. Class III Uncorrected 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on observation, interview and record review, the facility failed to have a Comprehensive Emergency Management Plan (CEMP) approved by the local emergency management agency. The findings included: Upon request of documentation from the local Emergency Management Division of an approved CEMP for the year 2019 through 2020 on _____ no documentation was provided. During an interview with Staff A and the Administrator over the phone at 9:53 AM on _____ it was		

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stated that I sent off the CEMP and EECP to the Local Emergency Management Division yesterday . the findings were discussed and acknowledged that the facility does not have an approved CEMP or EECP . No further information was provided for review. Class III Uncorrected 0200 - Emergency Environmental Control - 58A-5.036 FAC Based on record review, and interview, the facility failed to ensure that their Emergency Environment Control Plan (EECP) was up-to-date and approved by the Local County Emergency Management Division. The findings included: Upon request of documentation from the local Emergency Management Division of an approved EECP for the year of 2019 through 2020 on no documentation was provided. During an interview with Staff A and the Administrator over the phone at 9:53 AM on it was stated that I sent off the CEMP and EECP to the Local Emergency Management Division yesterday . the findings were discussed and acknowledged that the facility does not have an approved CEMP or EECP . No further information was provided for review. Class III Uncorrected		