| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | **AL11942940** | R<br>**04/02/2019** |
| NAME OF PROVIDER OR SUPPLIER<br>**SOUTH OAKS ASSISTED LIVING HOME, LLC** | STREET ADDRESS, CITY, STATE, ZIP CODE<br>**6141 SW 34TH STREET**<br>**MIRAMAR, FL 33023** | |

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

**0000 - Initial Comments**

An unannounced revisit to the Generator Assessment Monitoring survey was conducted by desk review on at South Oaks Assisted Living Home, LLC, License #5855. The facility had uncorrected deficiencies found at the time of the survey.

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

Based on interview and record review, the facility failed to provide evidence of the Comprehensive Emergency Management Plan approval letter (CEMP) from the local emergency management agency.

The findings included:

a) On at 10:15 AM, the Administrator was requested to provide the CEMP approval letter. He stated he was having problems with obtaining the Fire Inspection approval letter. He could not provide proof of the CEMP receipt and/or approval.

At this same time, the Administrator acknowledged the findings. He stated he had attended a meeting recently with the local emergency management agency. He stated he is working on obtaining the approval letter.

b) During the desk review revisit survey conducted on , the facility still was unable to provide proof of a current approved CEMP (CEMP approval letter).

Class III
Uncorrected

**0200 - Emergency Environmental Control - 58A-5.036 FAC**

Based on interview and record review, the facility failed to provide evidence of the Emergency Environmental Control Plan (EECP) approval letter.

The findings included:

a) On at 10:15 AM, an interview was conducted with the Administrator. He stated he does not have the generator approval plan yet. He stated he is still working with the local county emergency

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

management agency for the Comprehensive Emergency Management Plan (CEMP).

At this same time, the Administrator stated he did not have the generator plan at this time. He acknowledged the findings. He stated he will inquire about obtaining the variance option to obtain more time.

b)During the desk review revisit survey conducted on , the following items were not corrected:

1) No EECP approval letter.

2) No acquisition of alternate power source.

3) No acquired services to maintain and test the alternate power source.

4) No written policies and procedures.

Class III
Uncorrected