

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/22/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966626	(X3) DATE SURVEY COMPLETED R 04/05/2019
NAME OF PROVIDER OR SUPPLIER PARADISE VILLA RETIREMENT AT SHERIDAN #V	STREET ADDRESS, CITY, STATE, ZIP CODE 11330 SHERIDAN STREET PEMBROKE PINES, FL 33028	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced revisit to the Relicensure survey was conducted on at Paradise Villa Retirement At Sheridan #v, (License # 11017). The facility had an uncorrected deficiency found at the time of the survey. This survey was conducted in conjunction with the revisit to the Operation Spot Check Monitoring survey on the same date. See separate report for findings. 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on record review and interview, the facility failed to ensure that their Comprehensive Emergency Management Plan (CEMP) was up-to-date and approved by the Local County Emergency Management Division. The Finding Include: a) During the Re-licensure Survey conducted on, this surveyor requested the facility's current Comprehensive Emergency Management Plan (CEMP). The Administrator provided this surveyor with a copy of the last approved CEMP dated, informing that the approval was valid through, . The CEMP had not been updated at the time of the survey. During the Exit Interview on between 1:20 PM and 1:35 PM, this surveyor shared the findings of the survey, at which time it was restated by this surveyor that the CEMP was not current. The Administrator acknowledged. b) During the Revisit Survey conducted on 4/5/19, the CEMP still had not been approved by the local County Emergency Management Division. Uncorrected Class III		