

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/22/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11943030	(X3) DATE SURVEY COMPLETED R 03/29/2019
NAME OF PROVIDER OR SUPPLIER TREEMONT ON THE PARK	STREET ADDRESS, CITY, STATE, ZIP CODE 3881 NE 3RD AVENUE OAKLAND PARK, FL 33334	
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 Treemont On The Park, License #8336. The facility had an uncorrected deficiency at the time of the survey. 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on record review and interview, the facility failed to have an approved Comprehensive Emergency Management Plan (CEMP) from the local County Emergency Management Division. The findings included: a) On at approximately 9:30 AM, the CEMP was requested from the Administrator. The Administrator advised that he had no recollection of submitting a CEMP to the local County Emergency Management Division or receiving an approved CEMP from the County. The Administrator kept referring to the approved generator plan, confusing it with the CEMP. The Administrator also stated that he did not have documentation of the most recent approved CEMP to provide for review. b) On at 10:48 AM, the approved current CEMP was requested from the Administrator. The Administrator stated he submitted the CEMP in and has not heard from the local emergency management division since the submission. No further explanation or documentation was provided at the time of the survey. Therefore, the facility at the time of the survey, was unable to show an approved current CEMP (including the approval letter). Class III Uncorrected		