

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/07/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966286	(X3) DATE SURVEY COMPLETED R 04/17/2019
NAME OF PROVIDER OR SUPPLIER THE EDEN INN ALF	STREET ADDRESS, CITY, STATE, ZIP CODE 4064 SW 51ST STREET DAVIE, FL 33314	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A revisit to the Relicensure survey was conducted at The Eden Inn ALF on The facility had uncorrected deficiencies at the time of the survey. 0181 - Emergency Plan Approval - 58A-5.026(2) FAC Based on observation, record review and staff interview, the facility failed to provide a current CEMP Comprehensive Emergency Management Preparedness Plan approved by the local Emergency Management Division. The findings included: During an interview with the Assistant Administrator, on at 10:40 AM, she stated that the facility submitted the plan to the local Emergency Management Division office on and it is pending. She further stated that since the last survey on, she made attempts by phone to inquire the status of the approval letter to respond to the facility's plan of correction, and was told that the unit is backlogged. She is planning to go to the local County Emergency Management Division office in person on to obtain any updated information. The Assistant Administrator confirmed the findings. Class III Uncorrected 0200 - Emergency Environmental Control - 58A-5.036 FAC Based on record review, and interview, the facility failed to provide a current EECF Emergency Environmental Control Plan approval letter by the local Emergency Management Division. The findings include: During an interview, on the Generator Assessment with the Assistant Administrator, on at 10:30 AM, she stated that the facility plan is pending approval of local permits to install a fixed generator. She further provided a letter from the Generator company explaining they are waiting variance permit approvals to install the fixed generator.		

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No other documentation or information provided during the survey and the Assistant Administrator confirmed the findings. Class III Uncorrected		