

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/11/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11922280	(X3) DATE SURVEY COMPLETED 05/28/2019
NAME OF PROVIDER OR SUPPLIER COTTAGES OF PORT RICHEY (THE)	STREET ADDRESS, CITY, STATE, ZIP CODE 5905 PINEHILL ROAD PORT RICHEY, FL 34668	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A monitoring visit was conducted at The Cottages of Port Richey on The facility had a deficiency at the time of the survey. 0200 - Emergency Environmental Control - 58A-5.036 FAC Based on record review and interview, the facility had not yet implemented its environmental control plan, nor obtained an acceptable extension authorization covering at least the last eleven (11) months. Findings included: Review of the facility's generator assessment plan with the administrator during the monitoring visit revealed that the plan had been approved However, further review of the document as well as interview with the administrator at 11:10am on found that said plan had not yet been implemented and that no extension request had been officially filed with the Agency or Dept. of Elder Affairs. The administrator furnished the Agency with a copy of an extension request from , requesting an extension for implementation through This was further verified by the accompanying email communication made between the facility's chief executive officer and AHCA representative dated and , indicating that this initial request had been approved. However, no other documentation could be produced that verified an extension request through and beyond had been received and granted. This was further verified on at approximately 11:22am through internal research of provider files at the AHCA Central office. Class III		