STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965988	R **05/29/2019**
NAME OF PROVIDER OR SUPPLIER **FREIRE & SOTOMAYOR ALF, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2303 SW 62 COURT** **MIAMI, FL 33155**	

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

0000 - Initial Comments

A revisit to a biennial survey was conducted at Freire & Sotomayor ALF, Inc. on . . . . . Deficiencies were found at the time of the survey.

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observation, record review and interview the facility with a capacity of less than 16 beds failed to store at least 48 hours of fuel onsite to ensure that in the event of the loss of primary electrical power there is sufficient fuel available for the alternate power source to maintain temperatures at or below 81 degrees Fahrenheit.

Findings included:

On . . . . at 10:40 AM observed a generator brand Champion, model 100155 7000kw/9000kw in the facility. Observed on the side of the facility a 5 gallons containers and 2 two gallons containers full of gasoline.

Record review revealed the generator tank had a capacity of 6.1 gallons and would run 8 hours at 50% load. The facility needed at least 36 gallons and had only 9 on the premises.

On 19 at 10:55 AM the Administrator stated, "I will buy 40 gallons."

Uncorrected
Class III

L241 - LMH - Records - 429.075( ); 58A-5.029(2) FAC

Based on record review and interview the facility failed to provide documentation of an updated annual Community Living Support Plan and . . . , ... agreement for one of six sampled residents (# 2).

Findings included:

Record review revealed that Resident # 2's community living support plan and . . . , ... agreement were dated .

on at 10:47 AM the Administrator stated, "They are taking her to the doctor on Friday because

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supposedly she has until the 31st to do it."

Uncorrected
Class III