

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968108	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/20/2019
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

L & L ASSISTED LIVING COMMUNITY INC

**4211 CHAIRES CROSS RD
TALLAHASSEE, FL 32317**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments An unannounced Comprehensive Emergency Management Plan (CEMP) Generator Checklist Monitoring survey was conducted at L & L Assisted Living Community Facility, in Chaires, Florida on At the time of the survey, deficiencies were identified.	A 000		
A 181 SS=D	58A-5.026(2) FAC Emergency Plan Approval (2) EMERGENCY PLAN APPROVAL. The plan must be submitted for review and approval to the local emergency management agency. (a) If the local emergency management agency requires revisions to the emergency management plan, such revisions must be made and the plan resubmitted to the local office within 30 days of receiving notification that the plan must be revised. (b) A new facility as described in Rule 58A-5.023, F.A.C., and facilities whose ownership has been transferred, must submit an emergency management plan within 30 days after obtaining a license. (c) The facility must review its emergency management plan on an annual basis. Any substantive changes must be submitted to the local emergency agency for review and approval. 1. Changes in the name, address, telephone number, or position of staff listed in the plan are not considered substantive revisions for the purposes of this rule. 2. Changes in the identification of specific staff must be submitted to the local emergency management agency annually as a signed and dated addendum that is not subject to review and approval. (d) The local emergency management agency is the final administrative authority for emergency management plans prepared by assisted living	A 181		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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NAME OF PROVIDER OR SUPPLIER L & L ASSISTED LIVING COMMUNITY INC			STREET ADDRESS, CITY, STATE, ZIP CODE 4211 CHAIRES CROSS RD TALLAHASSEE, FL 32317		
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A 181	Continued From page 1 facilities. (e) Any plan approved by the local emergency management agency is considered to have met all the criteria and conditions established in this rule. This Statute or Rule is not met as evidenced by: Based on observation, staff interview, and review of the facility's Comprehensive Emergency Management Plan (CEMP), the facility failed to submit and obtain the required approval for the CEMP from the local Emergency Management agency. The findings included: On _____, an observation was made at approximately 2:30 PM of the facility's alternate power source, a Generac Model - Guardian, Size - 22. Documentation from the installing electrician indicated the generator met the requirements to provide full power for the entire facility. At the time of the observation, an interview was conducted with the administrator who was unable to produce documentation that the CEMP had been submitted to, reviewed, and approved the Leon County Emergency Manager (EM). The administrator provided a trail of email communication indicating that the Agency for Health Care Administration (AHCA) Assisted Living Facility (AFL) unit had requested the facility Emergency Operation Center (EOC) plan approval on _____ and _____. On _____ at approximately 3:30 pm, an interview was conducted with the administrator to	A 181			

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A 181	Continued From page 2 clarify that the CEMP must be submitted to the local EM. The administrator called the local county emergency management office in the surveyors' presence and was informed of the new county EM contact. The administrator stated that she thought that all of the required forms had been submitted by the generator and electrician contractors. The surveyor and the administrator spoke with the EM at the local Emergency Operations Center. The administrator was told by the EM that the administrator needed to submit the 2019 CEMP and have the local Fire Safety come to the facility before a CEMP approval would be issued. Class III	A 181		