STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966752	**06/13/2018**
NAME OF PROVIDER OR SUPPLIER **AVERY COTTAGE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **4052 COLLIN DRIVE** **WEST PALM BEACH, FL 33406**	

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

0000 - Initial Comments

An unannounced abbreviated Relicensure survey was conducted on . . . . . at Avery Cottage, License #10887. The facility had a deficiency identified at the time of the visit.

0181 - Emergency Plan Approval - 58A-5.026(2) FAC

Based on facility record review and staff interview, the administrator failed to provide an approval letter from the local emergency management agency for the facility's comprehensive emergency managment plan (CEMP).

The findings included:

During facility record review on , a current approval letter from the local emergency management agency for the current CEMP submitted for approval was not found.

On at 9:30 AM, the administrator was asked for a copy of the previous CEMP approval letter, and the date the current CEMP was submitted for review. The administrator stated she had submitted the CEMP for approval, but had not yet received an approval from the county. The administrator produced a receipt showing submission of CEMP to the county on . The previous CEMP approval letter submitted for review was dated . . . . . and stated the CEMP was approved until . No further documentation was provided by the Administrator.

Class III