STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932514	**08/29/2018**
NAME OF PROVIDER OR SUPPLIER **THE BROOKSHIRE**	STREET ADDRESS, CITY, STATE, ZIP CODE **85 BULLDOG BLVD.** **MELBOURNE, FL 32901**	

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

0000 - Initial Comments

An annual monitoring survey was conducted on and . The Brookshire license # 7354 had deficiencies at the time of the visit.

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

Based on interview the facility failed to submit the Comprehensive Emergency Plan (CEMP) to the local emergency management agency for review and approval.

Findings:

In an interview with the administrator on at 10 AM who said the CEMP was submitted to the Brevard County Office of Emergency Management on . She had not received a letter of approval. A letter dated confirmed her statement. She provided a letter dated that indicated the plan was reviewed and approved. The administrator state that was the last time the plan was approved.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on observations and interview, the facility had no evidence to confirm that their emergency power plan was submitted for review and approval, did not develop and implement written policies and procedures to ensure the assisted living facility could effectively and immediately activate operate and maintain the alternate power source and any fuel required for the operation of the alternate power source, did not have an alternative power source and 48 hours of fuel on site in the event of the loss of primary electrical power, did not have monoxide alarms.

Findings:

On at 1:30 PM, the maintenance director said that the power plan was in the works. Corporate sent someone to the facility with a plan/blueprint. He looked for an area to put a vent and planned to put a fixed generator outside. However, the power plan had not been submitted. According to the maintenance director in case of a hurricane we look at the strength of the hurricane. He further explained that if power goes out, "I give 2 hours if the power is not back on by then we would evacuate. We would arrange for a generator and place residents on the first floor. I would try to call other facility to obtain a generator or bring mine from home".

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

In an interview on ..... at 12:30 PM with the administrator who said the power plan was in the works. She did not have the emergency power plan written policies and procedures to ensure the assisted living facility could effectively and immediately activate operate and maintain the alternate power source available for review, she further stated he had just requested an extension from the agency for the implementation of the plan.

In an interview on ..... at 2PM with the administrator who said the maintenance director was mistaken, in the event of a hurricane all residents would be evacuated.

Observations on at 2 PM revealed there were no monoxide alarms in the facility.

The administrator confirmed at the time there were no monoxide alarms in the facility.

Class III