STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966752	R 09/26/2018
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

A relicensure revisit survey was conducted on , 2018, , 2018, and , 2018 at Avery Cottage, Inc, License #10887. The facility had an uncorrected deficiency at the time of the desk review.

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

Based on record review and interview, the facility failed to ensure the Comprehensive Emergency Management Plan (CEMP) was submitted and approved annually by the local Emergency Management Agency.

The findings included:

On at 1:35 pm, an interview with the facility Administrator revealed that the facility has not received a 2018 CEMP approval letter. The Administrator stated that the plan was initially rejected; but resubmitted about two months ago. The Administrator was unable to provide the surveyor with a date the last revision was submitted, or the 2017 CEMP approval letter.

During an interview with the senior planner of the division of Emergency Management on at 5:23pm, it was revealed that the facility's CEMP plan expired on , and it should have been submitted by . It was revealed that the facility did not comply with the deadline, and the Emergency Management office received the initial submission on , and that was rejected as well. It was revealed that the first revision review is underway, an initial failed submission letter was provided.

During a phone interview with the facility administrator, on at 2:00pm it was revealed that the facility will be reissued another citation. Administrator stated that she understood.

Class III
Uncorrected Deficiency