Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	034525	08/07/2018
Name of Provider or Supplier	**Street Address, City, State**	
Saguaro Rehabilitation And Aquatic Therapy, Llc	305 North Plaza Drive, Apache Junction, AZ	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
I0509	ADMINISTRATOR CFR(s): 485.56(b)(2) The governing body must appoint an administrator who implements and enforces the facility's policies and procedures. This STANDARD is not met as evidenced by: Based on review of facility policies/procedures, and staff interviews, it was determined that the facility failed to follow their own facility policy and ensure that all their policies and procedures were reviewed and updated at least once per year. This deficient practice poses a high potential risk for staff and patients, if staff providing the care are not aware of the facility's policies and procedures for daily operations. Findings include: Administrative Policies 1-F) 1513: Advisory Board Review of Policies: Review Date: 5/27/2015, requires: "... Policy: Its is the policy of Saguaro that the Board of Directors and Professional Advisory Board, will review all policies and procedures, including Budget Review at least once per year, or more often as needed...." The Executive Director confirmed during an interview conducted on 08/02/18, that the policies and procedures have not been reviewed or updated per facility's polices and procedures.