Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	034525	12/09/2020
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)
E0009	Local, State, Tribal Collaboration Process CFR(s): 485.68(a)(4) 403.748(a)(4), 416.54(a)(4), 418.113(a)(4), 441.184(a)(4), 460.84(a)(4), 482.15(a)(4), 483.73(a)(4), 483.475(a)(4), 484.102(a)(4), 485.68(a)(4), 485.542(a)(4), 485.625(a)(4), 485.727(a)(5), 485.920(a)(4), 486.360(a)(4), 491.12(a)(4), 494.62(a)(4) [(a) Emergency Plan. The [facility] must develop and maintain an emergency preparedness plan that must be reviewed, and updated at least every 2 years [annually for LTC facilities]. The plan must do the following:] (4) Include a process for cooperation and collaboration with local, tribal, regional, State, and Federal emergency preparedness officials' efforts to maintain an integrated response during a disaster or emergency situation. * * [For ESRD facilities only at 494.62(a)(4)]: (4) Include a process for cooperation and collaboration with local, tribal, regional, State, and Federal emergency preparedness officials' efforts to maintain an integrated response during a disaster or emergency situation. The dialysis facility must contact the local emergency preparedness agency at least annually to confirm that the agency is aware of the dialysis facility's needs in the event of an emergency. This STANDARD is not met as evidenced by: Based on record review and staff interview, it was determined, the facility failed to update the facility's process for cooperation and collaboration with local, tribal, regional, State, and Federal emergency preparedness officials, at least every 2 years as part of the facility's emergency preparedness plan (EPP). Failure to include a process for cooperation and collaboration could lead to harm to both patients and staff. Findings include: The surveyors requested documentation from the facility on 12/09/2020 related to cooperation and collaboration with local, tribal, regional, State, and Federal

	emergency preparedness officials as part of the requirements for an EP plan. The information related to cooperation and collaboration with local, tribal, regional, State, and Federal emergency preparedness, was last updated September 2018, according to facility documentation. The Executive Director confirmed on 12/09/2020, the facility failed update documentations regarding cooperation and collaboration with local, tribal, regional, State, and Federal emergency preparedness officials , as required for the facility's EPP.