Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11968041	A. BUILDING: _____ B. WING _____	R 12/10/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TROY & GREG CORP	12260 SW 184TH ST MIAMI, FL 33177

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{A 000}	Initial Comments A 2nd revisit to a COVID-19 monitoring survey was conducted at Troy & Greg Corp. on . Deficiencies were identified at the time of the visit.	{A 000}		
{A 093} SS=D	59A-36.012(2) FAC Food Service - Dietary Standards (2) DIETARY STANDARDS. (a) The meals provided by the assisted living facility must be planned based on the current USDA Dietary Guidelines for Americans, 2010, which are incorporated by reference and available for review at: http://www.flrules.org/Gateway/reference.asp?No=Ref-04003, and the current summary of Dietary Reference Intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academies, 2010, which are incorporated by reference and available for review at: http://iom.edu/Activities/Nutrition/SummaryDRIs/~/media/Files/Activity%20Files/Nutrition/DRIs/New%20Material/5DRI%20Values%20SummaryTables%2014.pdf. Therapeutic diets must meet these nutritional standards to the extent possible. (b) The residents' nutritional needs must be met by offering a variety of meals adapted to the food habits, preferences, and physical abilities of the residents, and must be prepared through the use of standardized recipes. For facilities with a licensed capacity of 16 or fewer residents, standardized recipes are not required. Unless a resident chooses to eat less, the facility must serve the standard minimum portions of food according to the Dietary Reference Intakes. (c) All regular and therapeutic menus to be used by the facility must be reviewed annually by a licensed or registered dietitian, a licensed	{A 093}		

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{A 093}	Continued From page 1 nutritionist, or a registered dietetic technician supervised by a licensed or registered dietitian, or a licensed nutritionist to ensure the meals meet the nutritional standards established in this rule. The annual review must be documented in the facility files and include the original signature of the reviewer, registration or license number, and date reviewed. Portion sizes must be indicated on the menus or on a separate sheet. 1. Daily food servings may be divided among three or more meals per day, including snacks, as necessary to accommodate resident needs and preferences. 2. Menu items may be substituted with items of comparable nutritional value based on the seasonal availability of fresh produce or the preferences of the residents. (d) Menus must be dated and planned at least 1 week in advance for both regular and therapeutic diets. Residents must be encouraged to participate in menu planning. Planned menus must be conspicuously posted or easily available to residents. Regular and therapeutic menus as served, with substitutions noted before or when the meal is served, must be kept on file in the facility for 6 months. (e) Therapeutic diets must be prepared and served as ordered by the health care provider. 1. Facilities that offer residents a variety of food choices through a select menu, buffet style dining, or family style dining are not required to document what is eaten unless a health care provider's order indicates that such monitoring is necessary. However, the food items that enable residents to comply with the therapeutic diet must be identified on the menus developed for use in the facility. 2. The facility must document a resident's refusal to comply with a therapeutic diet and provide	{A 093}		

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{A 093}	Continued From page 2 notification to the resident's health care provider of such refusal. (f) For facilities serving three or more meals a day, no more than 14 hours must elapse between the end of an evening meal containing a protein food and the beginning of a morning meal. Intervals between meals must be evenly distributed throughout the day with not less than 2 hours nor more than 6 hours between the end of one meal and the beginning of the next. For residents without access to kitchen facilities, snacks must be offered at least once per day. Snacks are not considered to be meals for the purposes of the time between meals. (g) Food must be served attractively at safe and palatable temperatures. All residents must be encouraged to eat at tables in the dining areas. A supply of eating ware sufficient for all residents, including adaptive equipment if needed by any resident, must be on . (h) A 3-day supply of nonperishable food, based on the number of weekly meals the facility has with residents to serve, must be on at all times. The quantity must be based on the resident census and not on licensed capacity. The supply must consist of foods that can be stored safely without refrigeration. Water sufficient for drinking and food preparation must also be stored, or the facility must have a plan for obtaining water in an emergency, with the plan coordinated with and reviewed by the local disaster preparedness authority. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to follow the posted menu approved by a licensed Dietician for five out five (Residents #1, # 2, #3, #4, #5) sampled residents. Findings included:	{A 093}		

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{A 093}	Continued From page 3 A review of the facility's weekly menu prepared and signed by the registered licensed dietitian showed the residents will receive soup of the day (8 ounces), tuna salad (3 ounces), on bread (2 slices), lettuce ad tomatoe (1 cup), and rice pudding (… cup) at dinner. On … …… at 10:25 AM showed there was no tuna salad and tomatoes in the facility. On at 10:40 AM, Resident #4 stated she does not like the ways the food smells and looks. She said "It is not pleasant, but it is not unpleasant." Resident #4 stated that they need some "soul food" at the facility. On at 10:59 AM, Resident # 5 stated that when Staff B is not working, all they eat is hot dogs, and she is tired off it. Resident #5 stated that Staff B has been there for about a month, and she cooks but Staff C does not cook and that is when they eat the hot dogs. On … …… at 12:00 PM, Resident #1 stated that the menu is not followed and that she provides her own cereal for breakfast. Resident #1 also stated that she is tired of eating the hot dogs being served every week. On … …… at 1:05 PM, the Owner stated that he does provide cereal and presented a box of cereal. The Administrator confirmed the facility serves hot dogs and ham & cheeses sandwich to the residents at dinner. He stated they could not serve tuna salad and tomatoes at dinner today because they did not have them.	{A 093}		

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{A 093}	Continued From page 4 Class III Uncorrected	{A 093}		
{A 095} SS=D	59A-36.012(4) FAC Food Service - . . . . . Food Service (4) FOOD SERVICE. When food service is . . . . . by the facility, the facility must ensure that the food service meets all dietary standards imposed by this rule and is adequately protected upon delivery to the facility pursuant to subsection 64E-12.004(4), F.A.C. The facility must maintain: (a) A copy of the current contract between the facility and the food service contractor. (b) A copy of the annually issued certificate or license authorizing the operation of the food service contractor issued by the applicable regulating agency. The license or certificate must provide documentation of the food service contractor's compliance with food service regulatory requirements. This Statute or Rule is not met as evidenced by: Based on observation and record review, the facility failed to maintain a daily log indicating the date, time, and food temperature at the time of delivery. Findings include: Observation on . . . . . at 10:30 AM showed catered food arrived in plastic containers and placed on the stove. A review of the facility's records showed the facility did not have a daily log indicating the date, time, and food temperature at the time of delivery.	{A 095}		

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{A 095}	Continued From page 5 On at 1:05 PM, the Owner confirmed the findings. Class III Uncorrected	{A 095}		