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 |
|---|---|---|---|
| | AL11966607 | A. BUILDING: _____ B. WING _____ | 12/16/2022 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| HERON HOUSE OF LARGO | 2050 EAST BAY DRIVE LARGO, FL 33771 |

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| A 000 | Initial Comments<br><br>A complaint investigation (Complaint Number: 2022016672, 2022016871) was conducted at Heron House of Largo Assisted Living Facility on [redacted]. Deficiencies were identified at the time of survey. | A 000 | | |
| A 093 SS=D | 59A-36.012(2) FAC Food Service - Dietary Standards<br><br>(2) DIETARY STANDARDS.<br>(a) The meals provided by the assisted living facility must be planned based on the current USDA Dietary Guidelines for Americans, 2020-2025, which are incorporated by reference and available for review at: http://www.flrules.org/Gateway/reference.asp?No=Ref-04003, and the current table of Dietary Reference Intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academies, 2019, which are incorporated by reference and available for review at: https://ods.od.nih.gov/HealthInformation/Dietary_Reference_Intakes.aspx. Therapeutic diets must meet these nutritional standards to the extent possible.<br>(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.<br>(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<br>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.<br>1. Daily food servings may be divided among three or more meals per day, including snacks, as necessary to accommodate resident needs and preferences.<br>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.<br>(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.<br>(e) Therapeutic diets must be prepared and served as ordered by the health care provider.<br>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.<br>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<br><br>notification to the resident's health care provider of such refusal.<br>(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.<br>(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 .<br>(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.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on observations, record review and interview the facility failed to maintain menu substitutions on file for 6 months, maintain menus dated and planned at least one week in advance and failed to ensure that therapeutic diets ( ⌄ .) met nutritional standards for all 94 | A 093 | | |

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| A 093 | Continued From page 3<br>residents in the facility.<br><br>Finding included:<br><br>An interview conducted on at 7:30 a.m. with Staff C, dining room server ( ) she stated we are told by the Director of Dietary Services who has or special requests. We also have a board with some information.<br><br>An observation on at 7:33 a.m. of a white information board in the kitchen. The board contained six resident names with specifications to cut food. A separate sheet of paper was observed to be attached to the board with a list of names with no dietary specifications. (See Photographic evidence).<br><br>An interview conducted on at 7:50 a.m. with Staff D, cook ( ) he stated "I prepare the plates with food. I'm told how many people are in the Memory Care unit and if there are any special diets. I expect to be informed by the staff in the Memory Care or the Director of Dietary Services. No, we do not have a book or a log for special diets/ . We would not know if there were special diets if we are not told by the staff or Director of Dietary Services."<br><br>An interview conducted on at 8:25 a.m. with the Director of Dietary Services she stated nursing will let us know if there are any or to cut meat. I will let the staff know. We have a book that we put a slip in. For memory care we always cut all the food.<br><br>An observation on at 8:45 a.m. food was observed in the Memory Care dining room, the food served to the residents was observed | A 093 | | |

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| A 093 | Continued From page 4 | A 093 | | |

not to be cut.

A record review conducted on of the special dietary orders binder revealed the binder had last been update in and contained the names of four residents. (See Photographic evidence).

A record review conducted on of the substitution log revealed the log had not been updated since , no evidence for the past 6 months. (See Photographic evidence).

An observation on at 11:30 a.m. of the menu posted in the entrance to the dining room revealed a menu posted on a sheet paper that did not contain a date. (See Photographic evidence).

An interview conducted on at 10:54 a.m. with the Care and Wellness Director. He stated "we have been working on it, we don't have a process right know. We are trying to coordinate how we will communicate to evening staff. We are relying on the medication technicians to communicate with the kitchen. I'm informed if the physician communicates with us. I usually let the Director of dietary services know, I go down to the kitchen and write a note or give her the sheets. We have been talking about a picture board, it has not been implemented."

Class III