

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 07/18/2013
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11922281	(X3) DATE SURVEY COMPLETED 07/08/2013
NAME OF PROVIDER OR SUPPLIER Westbrooke Manor	STREET ADDRESS, CITY, STATE, ZIP CODE 6701 Dairy Road Zephyrhills, FL 33542	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards

0000-Initial Comments

Assisted Living Facility

Two complaint surveys, CCR# 2013005784 & CCR# 2013006917, were conducted on

The Westbrooke Manor, assisted living facility, had a deficiency found at the time of the visit.

0093-Food Service - Dietary Standards 58A-5.020(2) FAC

Based on observation, record review, and staff interview, the facility failed to ensure that: 1.) all regular and therapeutic menus used by the facility are reviewed annually by a registered dietitian, licensed dietitian/nutritionist, or by a dietetic technician supervised by a registered dietitian or licensed dietitian/nutritionist; 2.) documentation of annual review is kept in facility files, including the signature of the reviewer, registration or license number, and date reviewed; 3.) regular and therapeutic menus as served, with substitutions noted before or when the meal is served, are kept on file in the facility for 6 months.

Findings include:

AHCA Surveyors conducted observation of dining services and menu review on . beginning at approximately 11:30am:

The Registered Dietitian-approved menu in use by the facility is dated . - annual menu expired . AHCA Surveyors observed the expired menu in use by the facility on . Per interview with the facility Dining Services Director (. at 1:20pm), she was not aware that the current Dietary Menu in use had expired.

Menu posted outside the dining hall for residents (and visitors/public) for lunch on Wednesday, . 10: Chili Mac, garlic bread, spinach, chicken rice soup, and coconut custard for dessert. Menu posted in kitchen for staff use for lunch on Wednesday, . 10: Chicken Quesadilla, Spanish rice, black beans, and coconut custard for dessert. Registered Dietitian-approved menu in use by the facility (menu expired .) at time of visit for lunch on Wednesday, . 10: Enchiladas, Spanish rice, black beans, coconut custard, coffee, decaf coffee, tea, milk, water. The menu posted for residents differed from approved menu, differed from kitchen menu, and differed from what was actually served.

Per interview with the Executive Chef (. at approximately 11:45am), he substituted Quesadilla for Enchiladas listed on Dietician-approved menu (dated . ; expired) in use by the facility because residents like Enchiladas better. AHCA Surveyor observed a blank form in the kitchen entitled " Substitution Record "

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-There were no entries on the form-no record of menu substitutions.

Per interview with the facility Administrator () at approximately 4:00pm, she called and spoke to the Registered Dietitian regarding sending the facility an updated menu. Copy of Menu approved by Dietitian/Nutritionist (with certification valid) faxed to AHCA Field Office at 8:45am.

Class III



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Westbrooke Manor
6701 Dairy Road
Zephyrhills, FL 33542

Dear Administrator:

Re: CCR# 2013005784 & CCR# 2013006917

This letter reports the findings of two complaint surveys that were conducted on , 2013, by a representative of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under **Health Facilities and Providers** on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call Paul Brown, HFES, at 727-552-2000.

Sincerely,

Paul Y. Brown
Patricia Reid Kaufman
Field Office Manager

For

PRC/kpr

Enclosure: State (5000-3547) Form

