| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | AL11967326 | 07/02/2013 |
| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE | |
| Independent Living With Care Inc | 3165 Sw Fambrough St Port Saint Lucie, FL 34953 | |
| SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION) | | |

**List of Tags Cited:**
St - A - 0000 - - Initial Comments
St - A - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards S-S= D
St - A - 0152 - 58a-5.023(3) Fac - Physical Plant - Safe Living Environ/other S-S= D
St - A - Z815 - 408.809, 435.02(2), 435.06 - Background Screening; Prohibited Offenses S-S= C

**0000-Initial Comments**
An Assisted Living Facility compliant inspection survey (CCR# 2013002707) was conducted on . . . . . at Independent Living With Care Inc. had licensure deficiencies found at the time of the visit. Deficient practice was identified at the time of the inspection.

**0093-Food Service - Dietary Standards 58A-5.020(2) FAC**
Based on observation, interview and menu review, the facility failed to serve the appropriate amount of starch as outlined on planned menu for 5 out of 5 sampled residents living in the facility (Resident #1,#2, #3, #4, and #5).

**The findings include:**

On . . . . . between 8:17 AM and 8: 30 PM, Resident's #1, #2, #3, #4, and #5 were observed having breakfast. Each resident was to receive one (1) pancake with one (1) serving of egg along with beverages.

A review of the planned menu revealed two (2) waffles and one (1) serving of eggs with beverage should have been served on . . . . . Further review of the menu revealed a line (written in ink pen) crossed through 2 waffles and a hand written note beside the line which stated, " pancake."

On . . . . . at approximately 10:20 AM, an interview was conducted with the Dietitian who created the facility's menu. The Dietician stated, one pancake is not an adequate amount of . . for the energy level of the residents in this facility. The Dietitian also stated, she has trained this facility's staff to provide a minimum of two of starch servings per meal.

On . . . . . at 10:24 AM, Staff A was interviewed. Staff A confirmed, he served each resident one pancake for breakfast. He states this was done, "to keep from having food going down the drain that is why I did that (served one pancake instead of two). I know they are not going to eat it that is why I went ahead and gave them one pancake, due to prior knowledge of me working here."

Class III

**0152-Physical Plant - Safe Living Environ/Other 58A-5.023(3) FAC**
Based on observation and interview, the facility failed to provide all residents with bedding free of stains (Resident #4) and provide an environment free of pest and clean carpets.

The findings include:

a) On . . . . . at approximately 8:00 AM, a tour of the facility was conducted. Stained carpets were noted in

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all of the resident .

b) On at 11:54 AM Resident #4's mattress cover was observed to have a large light brown stain covering 50% of the bed area (picture taken).

c) A review of the County Health Department's inspection report (dated revealed the facility received a violation for, "old and stained" carpets. The reports also denoted an infestation of ants in the facility's kitchen.

d) On at 9:20 AM, the County Health Department's Environmental confirmed her findings of pest and stained carpets.

e) On at 11:55 AM, the Administrator was interviewed. She confirmed there is a large stain on Resident #4's mattress cover. She reported the stain was caused by Resident #4's incontinence issue. She states, she will purchase a new cover for Resident #4's mattress.

Class III

**Z815-Background Screening; Prohibited Offenses 408.809, 435.02(2), 435.06**

Based on interview and record review the facility failed to ensure the Administrator had a Level II background screening as required.

The findings include:

A review of employee records revealed the Administrator date of hire is listed as . The Administrator had a level II background screening on (5 years ago).

A review of the Agency for Health Care Administration's background screening website revealed the owner's status as, "new screening required." On at 11:58 AM, interview with the Administrator confirmed she was in 2008 (prior to her background screening). The Administrator confirmed that when staff D is working he is responsible for direct resident care and supervision.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

. 2013

Administrator
Independent Living With Care Inc
3165 SW Fambrough Street
Port Saint Lucie, FL 34953

**RE: CCR #2013002707**

Dear Administrator:

This letter reports the findings of a state licensure survey that was 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 after **2013** 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 representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD/ls
Enclosure

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
http://ahca.myflorida.com

Delray Beach Field Office
5150 Linton Boulevard, Suite 500
Delray Beach, FL 33484
Phone (561) 381-5840; Fax (561) 496-5924