STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963790	03/06/2015
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
The Renaissance	1050 Southwest 24th Avenue Deerfield Beach, FL 33442	
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 S-S= D

Specific Tag Findings:
0000-Initial Comments
An unannounced complaint survey CCR #2014012080 was conducted on and at The Renaissance. The facility had deficiencies found at the time of the visit.

This survey was conducted in conjunction with the Abbreviated Biennial Relicensure and Extended Congregate Care and Limited Nursing Services survey. Reference the separate report.

0093-Food Service - Dietary Standards 58A-5.020(2) FAC
Based on observation, interview, and record review conducted on and it was determined that a nutritional adequate menu was not planned for the 25 residents of the Memory Care Unit.

The findings include:

During the review of the facility's approved menu on it was noted that the menu did not include a servings of milk, bread, butter/margarine for the breakfast, lunch, and dinner menus. Interview with the Food Service Supervisor at the time of the review stated that the residents in the main dining are alert enough to request milk, bread, and butter. It was then revealed that the non-interview residents residing in the New Vistas (memory care unit) are not able to request foods due to cognition issues. It was further discussed that the regular, therapeutic, and mechanically altered diets for the New Vistas residents was required to include 16 ounces milk, 3 slices bread (or equivalent), and 3 teaspoons of margarine daily to ensue that the menu is nutritionally adequate to meet USDA guidelines for the needs of the adult population.

During the observation of the lunch meal conducted in the New Vista Unit on at 12:15, it was noted that R #1, R #2, R #3, R #4 and R #5 along with 20 non-sampled residents were not served a portion of milk or bread. A second meal observation conducted in the New Vista Unit for the breakfast meal on at 8:15 AM noted that R #1, R #2, R #3, R #4, and R #5 along with 20 non-sampled residents failed to receive a 8 ounce portion of milk or equivalent to ensure that nutritional needs of the residents in the memory care unit were being met.

On a phone interview was conducted with the facility's Consultant Dietitian who stated that a menu would be developed for the residents residing in the New Vista Unit to ensure that their nutritional needs would be met.

During an interview with the Administrator on at 2 PM, aforementioned was acknowledged. It was further stated that no additional documentation was available for review.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

. 2015

Administrator
The Renaissance
1050 Southwest 24th Avenue
Deerfield Beach, FL 33442

RE: CCR #2014012080

Dear Administrator:

This letter reports the findings of a complaint survey that was conducted on . 2015, . 2015 and . 2015 by representatives 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 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 representatives. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD/dso
Enclosure: 5000-3547

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