STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965970	R 02/28/2017
NAME OF PROVIDER OR SUPPLIER **SHADY OAKS REST HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **1208 KENNEDY RD** **DAYTONA BEACH, FL 32117**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 Initial Comments

A follow-up visit to a biennial survey with Limited Mental Health was conducted at Shady Oaks Rest Home (Lic. #10293) on . Shady Oaks Rest Home had deficiencies at the time of the visit.

0093 Food Service - Dietary Standards

Based on observation, interview and record review, the facility failed to notify 10 of 10 residents before a substitution to the menu was made, failed to provide the menu approved by the registered dietician for 10 of 10 residents, and failed to post the menu in an area accessible to 1 of 10 residents that reside in the facility. (Resident #4)

The findings include:

On at 8:15 AM, three residents were observed sitting at the dining finishing breakfast. The menu for week 1 was observed posted on a bulletin board located behind the dining .

An interview with the Administrator at the time of the observation confirmed the facility was using the week 1 menu that was on the bulletin board. Record review of the menu for the day found the following items were to be served: 1/2 cup orange juice or cranberry juice with C, 1/2 cup of grits or dry cereal, 2 ounces of sausage, 1 biscuit. 1/2 grapefruit, 1 teaspoon oleo and 8 ounces of milk.

On at 8:20 AM, Resident #10 was asked what she had for breakfast. She said she had grits and a peanut butter sandwich. She was asked if she had sausage and she stated, "They do not serve meat." She was asked if sausage was offered and she stated "no". An observation of the meal sitting in front of the resident at the time of interview found Resident #10 had grits left in her bowl, a small empty plate, and two empty cups. One of the cups was a small glass juice cup and the other a clear cup with a handle. Resident #10 was asked about the size of the sandwich. She stated the sandwich was a wedge. She was asked which cup the milk was served in and she pointed to a small juice cup no more than 3 inches high and very narrow. Employee B was in the area at the time of observation and she was asked how much milk the cup would hold. She stated 8 ounces. She was asked for a measuring cup to measure the amount. She did not provide it and then stated the residents do not drink that much.

During an interview with Resident #4 on at 9:43 AM, he stated they had grits and a jelly sandwich for breakfast. He was asked if he had sausage. He stated he would have like to have sausage and that it was not offered. He was asked if he had seen the menu for the day, he stated, no, and that it was difficult to see the menu on the wall where it was posted as it was hard to get behind the table in a

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wheelchair.

The Administrator was asked for the substitution log. Record review of the substation log found on "1/2 egg was substituted for the sausage due to resident request."

During further interview with the Administrator and Employee B on at 9:45 AM, both stated that they do not serve sausage and try to give the residents what is healthy. The Administrator was asked if the facility had sausage. He was able to produce two packages of sausage from the freezer. The Administrator also confirmed the facility did not post the egg would be substituted for the sausage. He was also asked why the menu was not in an area where a resident in a wheelchair could easily see it. He state it was in other places in the past and that the residents just tear it down.

Class III

L243 LMH - Training

Based on employee record review and staff interview, the facility failed to ensure 3 of 4 direct care staff members received a minimum of 6 hours of specialized training in working with individuals with mental health diagnoses that was provided by or approved by the Department of Children and Families.

The findings include:

During an interview with the Administrator on at 9:30 AM he was asked to provide evidence of the Limited Mental Health training for Employee B (hired), Employee C (hired), and Employee D. He provided certificates that showed documented training provided and he was the trainer. He was asked if the three employees ever attended limited mental health training conducted or approved by the Department of Children and Families. He stated he had always done the initial 6 hour training himself. He did not have any additional information to provide.

Class III