STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910546	03/21/2017
NAME OF PROVIDER OR SUPPLIER **VARNUM'S REST HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **12167 NW FREEMAN ROAD** **BRISTOL, FL 32321**	

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

0000 - Initial Comments

An unannounced Biennial survey with Limited Nursing Services and Limited Mental Health was conducted at Varnum's Rest Home Assisted Living Facility (license #6026) located in Bristol, FL on - . Deficient practice was identified at the time of the survey.

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review and staff interview the facility failed to ensure staff submit a written statement from a health care provider (a physician, physician assistant or advanced registered nurse practitioner) documenting they are free from signs of communicable for 3 of 3 sampled employees. (employees A, B and C)

The findings include:

Review of employee A, B and C's file was conducted on . Employee A's file revealed a hire date of and a communicable statement dated signed by a Licensed Practical Nurse (LPN). Employee B's file revealed a hire date of and a communicable statement dated signed by an LPN. Employee C's file revealed a hire date of and a communicable statement dated signed by a Registered Nurse.

An interview was conducted with the Assistant Administrator on at approximately 10:20 AM. She stated she thought nurses could sign the communicable statements.

Class III

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

Based on observation, record review, resident interviews, and staff interview the facility failed to provide all menu items or equivalent menu items during 1 of 2 meals observed. (lunch)

The findings include:

An observation of the lunch meal was conducted on at approximately 11:20 AM. The residents were served vegetable soup, ham sandwich, saltine crackers, and fruit. The residents were not served lettuce and tomato with the sandwich or 3 bean salad. No equivalent menu items were offered in place of the lettuce, tomato and three bean salad. The posted approved menu revealed residents were to be served , , meat sandwich, cheese, tomatoes, lettuce leaves, three bean salad, and fruit desert.

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SUMMARY STATEMENT OF DEFICIENCIES
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Interview was conducted with the Assistant Administrator on at approximately 12:15 pm. She stated there were no tomato and lettuce available and the three bean salad was not served because the residents did not want it.

Interview was conducted with employee E on at approximately 9:36 am. She stated she thought the vegetable soup was an appropriate alternate for the three bean salad.

Interview was conducted with resident #6 and resident #7 on at approximately 10:07 am. Resident #6 stated he would like to have lettuce with his sandwich but it is never offered. Resident #7 stated he likes lettuce as well but it is never offered. He stated he has only had lettuce about three times since his admission almost three years ago.

Class III