STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965225	R 07/25/2017
NAME OF PROVIDER OR SUPPLIER **GOLDEN POND COMMUNITIES**	STREET ADDRESS, CITY, STATE, ZIP CODE **400 LAKEVIEW ROAD** **WINTER GARDEN, FL 34787**	

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

0000 - Initial Comments

Revisits to the 6-month licensure survey and complaint investigations #2016000369, #2015009103, #2015007905, #20150013342 were conducted on 7/24/17 and 7/25/17. In addition to a Change of Ownership Survey (CHOW), including Limited Nursing Services (LNS) was conducted on the same dates. Golden Pond Communities Assisted Living Facility, License #9626, had deficiencies related to the revisit to the 6-month survey at the time of the visit.

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

DEFICIENCY REMAINED UNCORRECTED

Based on observation, dietary record review and interview, the facility failed to: 1. Post menus dated for the week in use for the residents to see, 2. Maintain a 6 month record of menus served, 3.Maintain menus that included portion sizes, 4. Ensure correct portions were served utilizing measured serving utensils, 5. Maintain a 6 month record of menu substitutions.

Findings:

1. Observation on at 10:30AM found menus posted in the dining of each building for the residents to view. The menus showed the current week was "Week Three of Five." There were no dates on any of the menus showing the week in use.

2. When the menus for the previous 6 months were requested, the dietary manager provided a copy of each of the 5 weeks of the menu rotation in use. No weeks of the rotation were dated.

3. Observation of the 5 weeks of menus used by the facility showed there were no portion sizes noted on the menus.

4. Observation of the kitchen revealed there were no measured serving utensils available for various portion sizes.

5. Observation of the facility substitutions for the previous 6 months showed no indication of substitutions earlier than , 2017.

In interviews with Staff F on at 1:20 PM and on at 1:00 PM, he stated they do make occasional changes to the menu. He said they had switched food and menu providers in the prior to 2017 and had started keeping track of substitutions in . He stated he did not realize he was

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supposed to keep track of when each week of the rotation was served. Additionally, he said he did not have portion sizes listed on any menu posted or in use in the kitchen.

On . . . , the dietary manager stated he found a new menu from their dietician online and it included dates and portion sizes. He said he would put that menu into use the following day. He confirmed he did not have serving utensils available to serve correct portions sizes as listed on the new menus.

On . . . at 2:30 PM, the administrator confirmed the facility was working with a new food vendor and supplier of menus and she would help ensure that all regulations were met going forward.

Class III