

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/25/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953349	(X3) DATE SURVEY COMPLETED 05/31/2018
NAME OF PROVIDER OR SUPPLIER LAMPLIGHT INN	STREET ADDRESS, CITY, STATE, ZIP CODE 1896 PARK MEADOW DRIVE FORT MYERS, FL 33907	

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

0000 - Initial Comments

An unannounced complaint survey for CCR# 2018007047, CCR # 2018006853 and CCR# 2018007271 was conducted . . . through . . . at Lamplight Inn, an assisted living facility (license # 5096) in Fort Myers, Florida.

The following is a description of the deficiencies related to this survey.

0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(5) FAC

Based on observation, record review, and staff and resident interview, the facility failed to ensure 1 (Staff J) of 4 medication techs reviewed had updated education requirements.

The finding included:

On . . . at 10:10 am, Resident #13 said that he felt that Med Tech Staff J does not know his job because he has missed medication and brought the wrong medication at times. Resident #13 said he has watched Staff J before and he looks bewildered when he is looking at the medication administration record and trying to give medication.

Record review of Staff J's personal file showed that he had a 4-hour assistance with self-administered medications training on . . . , but did not receive the 2-hour annual update training as required in almost 2 years.

On . . . at 4:30 pm, Staff J was observed giving Resident #22, #25, and #47 their medications. Staff J gave each resident their medication separately but did the procedure in the same way each time. Staff J placed each resident's medication into a small medication cup while he was standing at the medication cart in the hallway. He then went into the resident's . . . told the resident that he had their medication. Staff J did not take the medication into the resident or read to them what they were taking. During the med pass observation, Staff J did not use hand hygiene between each of the 3 passes, such as hand washing or using an . . . hand gel.

On . . . at 10:45 a.m. the Wellness Director said that medication technicians are trained to take medication to residents and read the medication label to them before placing medication into the pill cup. She also said that medication technicians should wash their hands or use hand gel for hand hygiene between residents.

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/25/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953349	(X3) DATE SURVEY COMPLETED 05/31/2018
NAME OF PROVIDER OR SUPPLIER LAMPLIGHT INN	STREET ADDRESS, CITY, STATE, ZIP CODE 1896 PARK MEADOW DRIVE FORT MYERS, FL 33907	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
In an interview on _____ at 10:45 a.m., with the Business Office Manager, who manages all employee files, she said she was unaware Staff J did not have his 2-hour medication update training in the last 2 years. Class III 0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC Based on interview, observation, record review, review of menus, and resident council minutes, the facility failed to provide food in accordance with menus approved by a registered dietitian, failed to maintain a log of menu substitutions, failed to offer residents a variety of food choices based on their preferences, and failed to prevent unintended weight loss as a result of food not being palatable for 9 (Resident #67, #54, #70, #63, #68, #69, #2, #33, and #71) of 14 residents interviewed about the food quality. The findings included: 1. On _____ at 10:20 a.m., Resident #67 said food is always the same thing; they had spaghetti 3 days last week which is not good for his _____. The resident said facility tends to serve high fat, high _____, and high protein food; had a lot of mashed potatoes and not enough greens; served breaded "mystery meats"; and when he peels off the breading, the meat is gray inside. Food is over cooked and rubbery. The resident council complained about the food being too salty and the facility said it was the broth being used. The food being salty has been better but residents had been complaining for a couple months about that. Resident #67 said the food committee is part of the resident council meetings. 2. On _____ during observation of the noon meal from 12:12 p.m., through 12:37 p.m., residents were served ham, sweet potatoes and Brussels sprouts. Resident #63 said the food is mediocre, will keep you alive, doesn't get enough protein, and just tiny pieces of meat. Resident #70 said she doesn't like sweet potato. Resident #63 said the ham is too tough and the only thing edible is the sweet potato. Resident #68 said Brussels sprouts are too hard and doesn't have lower _____ in so very chewy. Resident #69 said she had no butter for the sweet potato, staff doesn't put any on the table for some reason. She has asked about 5 times and never got any until after she finished eating. She doesn't get any greens and over time she has gone to the resident council meeting and has told them. Resident #69 also said they feel more greens would be good for them and did ask for a baked potato last meeting. Has been here a year and only had one about a week ago after the council complained.		

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/25/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953349	(X3) DATE SURVEY COMPLETED 05/31/2018
NAME OF PROVIDER OR SUPPLIER LAMPLIGHT INN	STREET ADDRESS, CITY, STATE, ZIP CODE 1896 PARK MEADOW DRIVE FORT MYERS, FL 33907	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
Resident #33 said he has a hard time chewing the ham as he has no 3. On at 10:50 a.m., Resident #54 said the food is horrible and is so bad she does not even eat it. The resident said she has lost 6 pounds in a week from not eating. She said the portions are getting smaller and pretty soon it will just be bread and water. She felt the food is too salty and thinks they are trying to give her high Resident #54 said she attends resident council meetings and complains about the food but nothing improves. The weight record for Resident #54 was reviewed and revealed the resident had lost 10 lbs in 5 months. Between and the resident lost 7 lbs. On at 4:08 p.m., Licensed Practical Nurse (LPN) Staff N confirmed Resident #54's weight record indicated the resident had lost 10 lbs. Staff N said she was not aware of the weight loss and did not know any reason for it. On at 4:10 p.m., the Wellness Director said she was not aware of any weight loss for Resident #54. She said the resident is , . . . about what she eats but was not sure why she was losing weight. 4.. On beginning at 12:23 p.m., the noon meal in the main dining observed. Residents were served sliced turkey, stuffing, and broccoli. Resident #33 said he couldn't chew the food and has trouble swallowing as the reason he wasn't eating his meal. Resident #2 said the food is not good and will eat cereal instead. Food is redundant and they are served a lot of noodles and chicken. She used to go to resident council all the time but nothing gets ever gets done. Resident #71 said most of the meat is overcooked. Resident #70 said she doesn't like broccoli. 5. Resident council minutes were reviewed from . . . , 2018 through . . . , 2018. Under dining concerns at the meeting, residents reported there were not enough menu items, would like more greens, and food is coming out At the meeting, residents reported they still would like a better variety of food; food is too salty; would like bigger portions; chicken is dry; and kitchen is running out of food. At the meeting residents reported kitchen is still running out of food but is better, and would like more baked/sweet potato. At the meeting residents reported kitchen is still running out of things; fresh vegetables and greens are frozen or overcooked; food is too salty; would like larger portions; do not have a menu; and servers just bring food out and are not asking what the residents want.		

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/25/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953349	(X3) DATE SURVEY COMPLETED 05/31/2018
NAME OF PROVIDER OR SUPPLIER LAMPLIGHT INN	STREET ADDRESS, CITY, STATE, ZIP CODE 1896 PARK MEADOW DRIVE FORT MYERS, FL 33907	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
6. On at 9:10 a.m., the facility's Food Service Designee (FSD) said the menus signed by a Registered Dietitian (RD) have not been implemented yet and would bring the current menus. The FSD said he had worked here about a year and used menus from a food vendor. The FSD said there had been no menu food substitution made since 2017. At 9:59 a.m., the FSD returned with menus printed off the Internet. The menus had no portion/serving sizes and were not signed and dated by an RD. There was no variation for any therapeutic diets. The 5-week cycle menu was reviewed and did have spaghetti/linguine 3 times in less than a week validating the residents' complaints. The menu called for au gratin potatoes not sweet potato to be served at the noon meal on The FSD said the residents had requested the baked sweet potato at the last meeting so made a substitution. The FSD acknowledged this would be a menu substitution and should have been noted on the log. The FSD also confirmed he had made other substitutions on holidays and other events and had not noted them. Class III		