STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966990	**06/25/2018**
NAME OF PROVIDER OR SUPPLIER **BRAYBROOK AT BAYONET POINT**	STREET ADDRESS, CITY, STATE, ZIP CODE **7532 STATE ROAD 52** **BAYONET POINT, FL 34667**	

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

0000 - Initial Comments

Assisted Living Facility

On , a biennial relicensure survey was conducted at Braybrook Residence, formerly Braybrook at Bayonet Point. Deficient practice was identified during the survey.

(License # 11127)

0091 - Training - Documentation & Monitoring - 58A-5.0191(12) FAC

Based on record review and interview, the training-related documentation for one of three care giver staff sampled (C) did not contain all of the required information including the trainer's name, signature and credentials.

Findings include:

A personnel record review during the survey found the following issues:

Staff C (hired) had the following training certificates that did not include the training provider's name, dated signature and credentials and professional license number (if applicable):

a)1 hr. control-- ; b) 3 hrs. ADLs/resident behavior and needs-- ;
c) 2 hrs. / -- ; d) 1 hr. elopement response policies/procedures-- ;
e) 1 hr. emergency preparedness/evacuation procedures-- ; f) 1 hr. incident reporting-- ;
g) 1 hr. resident rights-- ; h) 1 hr. reporting , neglect, , -- ;
i) 1 hr. policies/procedures-- ; j) 1 hr. safe food handling

Interview with the administrator at 1:20pm on , who reported providing the majority of the above-referenced training, indicated that she hadn't been documenting the certificates properly for all her staff.

Class III

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

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

Based on observation, record review and interview, the facility did not substitute menu items of comparable nutritional value with respect to one of one meals observed.

Findings include:

At 12:15pm on , the following items were noted to be served to the residents during the noon time meal:

a) chicken; b) rice; c) mixed vegetables; d) tapioca pudding; and e) beverages (water; iced tea; milk). Review of the menu items corresponding to the same day (week cycle; day) per staff/administrator found the following items planned: vegetable chowder; chicken/fruit salad; tossed salad; dinner roll; fresh fruit; beverages (water; iced tea; milk).

Further observation found that no tossed salad, dinner roll, or fresh fruit had been prepared/served. Interview with staff at 12:30pm on provided no clarification as to why no tossed salad or rolls were prepared, and although staff indicated during the same interview that "the pudding had been provided to substitute for the fresh fruit", this was not a nutritional equivalent that had been switched out. Finally, it was unclear what had been served in place of the vegetable chowder, as well as the tossed salad, since there was only one (1) vegetable dish served at the lunch meal. The staff person provided no clear response during the same interview as noted above.

Class III