STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964730	**02/15/2019**
NAME OF PROVIDER OR SUPPLIER **MAJESTIC MEMORY CARE CENTER**	STREET ADDRESS, CITY, STATE, ZIP CODE **1200 ARTHUR STREET** **HOLLYWOOD, FL 33019**	

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

0000 - Initial Comments

An unannounced relicensure survey was conducted on and at Majestic Memory Care Center, License #9201. The facility had deficiencies at the time of the survey.

0008 - Admissions - Health Assessment - 429.26( ) FS; 58A-5.0181(2) FAC

Based on record review and interviews, the facility failed to ensure that 1 of 2 sampled health assessment records reviewed (AHCA form 1823) was updated to reflect the current status, for 1 or 10 sampled residents (Resident #4).

The findings included:

During an interview conducted with Resident #4's family member on at 10:00 AM, it was reported that on occasion Resident #4 had tried to leave the facility. The family reported that she was notified about the behavior.
During an interview with the Administrator on at around 11:30 AM, it was revealed that Resident #4 posed a serious risk of elopement. He reported that the resident had on multiple occasions tried to exit the building. Resident #4 pulled the alarms but he is unaware that it only rings in the inside of the facility. The Administrator revealed during a tour that most of their exit doors have two alarmac triggers one that activate the alarm inside the building and the other outside.

Review of the Nurses' Progress notes from to revealed that the resident's exit seeking was disturbing and could even compromise the other residents' health. Based on a letter provided by the facility, Resident #4's family was given a notice indicating that Resident #4's behavior was a problem.
Review of the Health Assessment dated 11/28/2018, section I indicates that Resident #4 is not an elopement risk. However, the interviews and the records reviewed clearly confirmed that Resident #4 is constantly trying to leave the facility.

During the exit interview, the Administrator provided no additional information.

Class III

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

Based on observation, record review, and interview, the assisted living facility failed to ensure the

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facility's dietician approved menu was followed at all times. As evidenced by not serving or substituting items of comparable nutritional value for menu items.

The findings include:

A review conducted on [redacted] at 12:00 PM, of the facility's posted dietician approved lunch menu for [redacted] revealed the menu to be chef's soup, pork chop supreme,sweet potatoes, cauliflower, cornbread and margarine, apple pie, coffee or tea and milk.
In an observation conducted on [redacted] at 12:00 PM, the lunch served to the residents lacked the cornbread and margarine, and no substitution was served.

A review conducted on [redacted] at 12:00 PM, of the facility's posted dietician approved lunch menu for [redacted] revealed the menu to be chef's soup, Norwegian fish,pesto pasta, seasoned yellow squash, wheat roll and margarine, frosted cup cake,coffee or tea and milk.
In an observation conducted on [redacted] at 12:00 PM the lunch served to the residents lacked the wheat roll and margarine, and no substitution was served.

In an interview conducted on [redacted] at 12:50 PM with the facility's dietary manager, he stated they do not have cornbread available, as the order came in on Tuesday and it was not on the truck. He was unable to say why a substitution was not served. In a subsequent interview conducted on [redacted] at 12:30 PM with the facility's dietary manager , he was unable to say why the wheat roll and margarine were not served and why a substitute was not served.

Class III