

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968029	(X3) DATE SURVEY COMPLETED 04/09/2019
NAME OF PROVIDER OR SUPPLIER BEE HIVE HOMES OF NICEVILLE	STREET ADDRESS, CITY, STATE, ZIP CODE 4268 IDA COON CT NICEVILLE, FL 32578	

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

0000 - Initial Comments

An unannounced state licensure biennial survey was completed in conjunction with a Change of Ownership survey was conducted at Beehive Homes of Niceville on & . Deficient practice was identified at the time of the survey.

0182 - Emergency Mgmt - Plan Implementation - 58A-5.026(3) FAC

Based on observation of the facility's designated emergency food supply, review of the facility's comprehensive emergency management plan (CEMP) and interview with facility staff, the facility failed to ensure their onsite emergency food supply was adequate in quantity according to their approved CEMP, failed to ensure emergency food supplies had been reviewed to ensure they were nutritionally adequate and failed to ensure all staff were trained on the appropriate use of their emergency food supply.

The findings were:

On at approximately 1:00pm, direct care Staff A led an observation of the facility's emergency dry food storage. The staff member led the way to a shelf that was observed to have several containers of labeled, freeze dried food items and a 3 day menu for use of the items. The menu did not contain portion sizes or any type of nutritional breakdown and was observed not to have been signed by a registered dietitian. A random inspection of an item listed on the menu, in this case the macaroni and cheese, showed that the container only contained nine servings. This was the only container of macaroni and cheese and no substitutes were mentioned on the accompanying menu. A review of the facility's current census showed a capacity of 16 residents with a current census of 14. The designated emergency food supply was not sufficient to provide for 14 residents for a 3 day time period.

Review of the facility's CEMP, approved by local officials on , showed the facility would need enough food to feed 16 residents 3 meals a day for the time period of one week in the event of an emergency.

On at approximately 10:25am, an interview was conducted with Staff A who confirmed the facility's CEMP planned for a one week supply of food for the residents in the event of an emergency and confirmed that they currently did not have the amount of non-perishable food to accommodate their CEMP. She also confirmed that the emergency food supply had been ordered from a website that had assured them the kit they ordered would contain enough food for their needs for 3 days. When asked about serving sizes and how the facility could ensure the emergency menu was nutritionally adequate,

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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FORM APPROVED**

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she confirmed that the menu for their emergency food supply did not have serving sizes and that the menu had not been approved by a registered dietitian to ensure nutritional adequacy. Class III		