Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11910326	A. BUILDING: _____ B. WING _____	06/19/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
L'ARCHE JACKSONVILLE, INC III	700 ARLINGTON ROAD JACKSONVILLE, FL 32211

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments A re-licensure survey was conducted at L'Arche of Jacksonville, Inc. III on [redacted] and [redacted]. The provider had deficiencies at the time of the visit.	A 000		
A 093	58A-5.020(2) FAC Food Service - Dietary Standards (2) DIETARY STANDARDS. (a) The meals provided by the assisted living facility must be planned based on the current USDA Dietary Guidelines for Americans, 2010, which are incorporated by reference and available for review at: http://www.flrules.org/Gateway/reference.asp?No=Ref-04003, and the current summary of Dietary Reference Intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academies, 2010, which are incorporated by reference and available for review at: http://iom.edu/Activities/Nutrition/SummaryDRIs/~/media/Files/Activity%20Files/Nutrition/DRIs/New%20Material/5DRI%20Values%20SummaryTables%2014.pdf. Therapeutic diets must meet these nutritional standards to the extent possible. (b) The residents' nutritional needs must be met by offering a variety of meals adapted to the food habits, preferences, and physical abilities of the residents, and must be prepared through the use of standardized recipes. For facilities with a licensed capacity of 16 or fewer residents, standardized recipes are not required. Unless a resident chooses to eat less, the facility must serve the standard minimum portions of food according to the Dietary Reference Intakes. (c) All regular and therapeutic menus to be used by the facility must be reviewed annually by a licensed or registered dietitian, a licensed	A 093		

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A 093	Continued From page 1 nutritionist, or a registered dietetic technician supervised by a licensed or registered dietitian, or a licensed nutritionist to ensure the meals meet the nutritional standards established in this rule. The annual review must be documented in the facility files and include the original signature of the reviewer, registration or license number, and date reviewed. Portion sizes must be indicated on the menus or on a separate sheet. 1. Daily food servings may be divided among three or more meals per day, including snacks, as necessary to accommodate resident needs and preferences. 2. Menu items may be substituted with items of comparable nutritional value based on the seasonal availability of fresh produce or the preferences of the residents. (d) Menus must be dated and planned at least 1 week in advance for both regular and therapeutic diets. Residents must be encouraged to participate in menu planning. Planned menus must be conspicuously posted or easily available to residents. Regular and therapeutic menus as served, with substitutions noted before or when the meal is served, must be kept on file in the facility for 6 months. (e) Therapeutic diets must be prepared and served as ordered by the health care provider. 1. Facilities that offer residents a variety of food choices through a select menu, buffet style dining, or family style dining are not required to document what is eaten unless a health care provider's order indicates that such monitoring is necessary. However, the food items that enable residents to comply with the therapeutic diet must be identified on the menus developed for use in the facility. 2. The facility must document a resident's refusal to comply with a therapeutic diet and provide	A 093		

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A 093	Continued From page 2 notification to the resident's health care provider of such refusal. (f) For facilities serving three or more meals a day, no more than 14 hours must elapse between the end of an evening meal containing a protein food and the beginning of a morning meal. Intervals between meals must be evenly distributed throughout the day with not less than 2 hours nor more than 6 hours between the end of one meal and the beginning of the next. For residents without access to kitchen facilities, snacks must be offered at least once per day. Snacks are not considered to be meals for the purposes of the time between meals. (g) Food must be served attractively at safe and palatable temperatures. All residents must be encouraged to eat at tables in the dining areas. A supply of eating ware sufficient for all residents, including adaptive equipment if needed by any resident, must be on . (h) A 3-day supply of nonperishable food, based on the number of weekly meals the facility has with residents to serve, must be on at all times. The quantity must be based on the resident census and not on licensed capacity. The supply must consist of foods that can be stored safely without refrigeration. Water sufficient for drinking and food preparation must also be stored, or the facility must have a plan for obtaining water in an emergency, with the plan coordinated with and reviewed by the local disaster preparedness authority This Statute or Rule is not met as evidenced by: Based on observation, facility document review, staff interview and resident interview the facility failed to follow the menu developed and reviewed by a registered dietician The facility failed to maintain a substitution log of the menu when	A 093		

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A 093	Continued From page 3 substitutions were made and prior to the meal being served. The findings include: During the biennial survey on and . . . . . , the evening meal preparation and service was observed on from 5:10 PM until 5:45 PM. Employee C was observed on at 5:10 PM preparing the evening meal. He was boiling spaghetti noodles and making spaghetti sauce at the stove. Several staff members were present in the kitchen at various times throughout the observation. At 5:25 PM on . . . . . Employee C stated "Oh, I forgot the broccoli" and reached into the freezer and took a bag of frozen broccoli out and laid it on the counter and started to read the directions on the bag. He then began to look for a pan to use to cook the broccoli. He took out a large stock pot and began to prepare the broccoli. Review of the menu revealed the meal Employee C was preparing was on week four of the six-week menu cycle. The meal on the menu read: Ireen's Pasta Primavera, broccoli, tossed salad, slice of garlic toast, ½ canned/1piece fresh fruit, low fat milk, beverages and condiments (Photographic evidence obtained). The facility was supposed to be following the sixth week of the menu cycle based on the date on the menu. Five residents were observed to eat together at the dining room table from 5:30 PM until 5:45 PM.	A 093		

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A 093	Continued From page 4 The meal consisted of spaghetti with sauce, broccoli, fruit and beverages. Tossed salad and a slice of garlic toast were not provided according to the menu. During an interview with Employee C on at 5:35 PM, when asked what was on the menu for tonight's dinner, Employee C did not know. He shrugged his and stated, "I think it's some kind of pasta." Dinner was delayed due to having to cook the broccoli. No tossed salad was observed to be prepared/served. When asked why the tossed salad was not served, Employee C did not answer, Employee D answered, and she stated, "It was not served because there are no greens in the house." When asked who is responsible for purchasing the needed groceries to make the meal on the menu every day, she stated "We all do." Employee E then stated, "The members do not like tossed salad." The substitution log was observed on a clipboard on the wall in the kitchen. The last entry was dated . The substitution log did not indicate that the members had made it known they did not like tossed salad and that it would be substituted. When asked what substitution was made for the tossed salad, Employee D stated "We gave them an extra portion of broccoli." The substitution log was observed on at 5:40 PM. The log had been updated but failed to show the substitutions on . (Photographic evidence obtained). During an interview with Resident #4 on at 12:15 PM, she stated she does like	A 093		

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A 093	Continued From page 5 to have a tossed salad with spaghetti and likes ranch style on it. During an interview with Resident #1 on at 12:30 PM, he stated he does like tossed salad with Italian . He would have eaten that at dinner last night. He did not know why they did not have it. During an interview with Resident #5 on at 4:05 PM, she stated she would have eaten a tossed salad with her spaghetti last night. During the exit conference with the administrator on at 4:30 PM, she stated she understood that the staff were not following the menu and making substitutions as necessary. Class III	A 093		