

RI Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALR01496	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 12/03/2025
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

HIGHLANDS ON THE EAST SIDE

101 HIGHLAND AVENUE
PROVIDENCE, RI 02906

(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
S 003	Initial Comments An unannounced complaint/incident investigation survey, ACTS reference numbers 102573, 102496, and 102468, was conducted at this residence on 12/03/2025 to determine compliance with state regulations. A deficiency was identified.	S 003		
S 580	Residential Care Services 2.4.23.G(1-4) Dietetic Services 2.4.23 (G) (1-7) Dietetic Services G. All food services shall be conducted in accordance with Part 50-10-2 of this Title, Certification of Managers in Food Safety that include but are not limited to the following provisions: 1. Each residence where potentially hazardous foods are prepared shall employ at least one (1) full-time, on-site manager certified in food safety who is at least eighteen (18) years of age. 2. Residences that primarily serve the elderly and individuals with diminished immune systems shall have a manager certified in food safety present during preparation of all hot potentially hazardous foods. 3. Residences that have a licensed capacity of twenty-six (26) or more residents and that employ ten (10) or more full-time equivalent employees directly involved in food preparation shall employ at least two (2) full time, on-site managers certified in food safety. 4. Residences that have a licensed capacity of twenty-five (25) or fewer residents and that	S 580	S580 Residential Care Services 2.4.23.G (1-4) Dietetic Services The Highlands has hired two (2) full-time RI-licensed Food Service Managers. All staff certifications will be openly displayed in the Kitchen area. In compliance as of 12/20/2025 and ongoing. Additionally, Culinary personnel required to be Food Safety Certified will be trained by Dotty Lebeau or a comparable training group. Anticipated completion date 1/31/2026. Licensure will be reviewed during the hiring process to ensure compliance and discussed weekly during the 1:1 meeting with the Administrator. Findings will be reviewed quarterly and reported to QA.	12/20/2025 1/31/2026

Received

JAN 05 2026

Facilities Regulation

Facilities Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

RI Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALR01486	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 12/03/2025
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S 580	Continued From page 1 employ five (5) or fewer full-time equivalent employees involved in preparation and serving of food, shall only be required to employ one (1) full time manager certified in food safety. This Requirement is not met as evidenced by: Based on observation, record review, and staff interview, it has been determined the facility failed to ensure that all food services are conducted in accordance with Certification of Managers in Food Safety (216-RICR-50-10-2) relative to the preparation of all hot potentially hazardous foods. Findings are as follows: A community reported complaint was sent to the Rhode Island Department of Health on 11/14/2025 alleging the residence does not have "Rhode Island food safety Manager." During a surveyor observation of the lunch meal on 12/3/2025 at approximately 1:00 PM, ham, chicken, and hamburgers were served to the residents. Observations failed to reveal the certificates of kitchen staff to be posted. There was only one cook observed in the kitchen at this time during meal preparation, Staff A. During an interview on 12/3/2025 with Staff A at approximately 1:30 PM, he indicated he is certified as a food safety manager. During a surveyor interview on 12/3/2025 at approximately 1:30 PM with the Dining Manager, he indicated he is not certified as a manager in food safety.	S 580		

QW
1/9/26

Michael J. W. M. 1/3/26

RI Department of Health

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NAME OF PROVIDER OR SUPPLIER HIGHLANDS ON THE EAST SIDE	STREET ADDRESS, CITY, STATE, ZIP CODE 101 HIGHLAND AVENUE PROVIDENCE, RI 02906
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S 580	Continued From page 2 During a surveyor interview with the Interim Administrator on 12/3/2025 at approximately 3:30 PM, she handed the surveyor Chef, Staff A's, ServSafe certification and revealed he worked the breakfast and lunch meal. Review of the Rhode Island Department of Health's website "verify a license" revealed that Staff A's Food Safety Manager certification had expired. Additional verification revealed the certification expired on 12/10/2024 and requires reinstatement. During a surveyor interview on 12/3/2025 at approximately 3:30 PM with the Regional Resident Care Director in the presence of the interim Administrator, she was unable to provide evidence that a person holding a current Certification of Managers in Food Safety was present during the preparation of hot, potentially hazardous foods.	S 580		