

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>AL11910367</b>	(X3) DATE SURVEY COMPLETED  <b>04/25/2018</b>
NAME OF PROVIDER OR SUPPLIER  <b>CRESTHAVEN EAST</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>5100 CRESTHAVEN BLVD. HAVERHILL, FL 33415</b>	

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

**0000 - Initial Comments**

An unannounced relicensure survey was conducted on [redacted] at Cresthaven East, ALF, License # 4878. The facility had deficiencies at the time of the visit.

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

Based on observation and interview, the facility Staff failed to serve food in a sanitary manner during the lunch dining observation, for 34 of 34 Residents dining in the Dining [redacted]. The facility failed to serve food at a palatable temperature for 1 of 34 residents ( Resident #6). The facility failed to ensure a clean and sanitary environment during the dining meal for 20 of 20 residents.

The findings included:

On [redacted] at 11:38 AM a dining observation was conducted in the Memory Care Unit of the facility. There were 6 staff observed serving 34 residents during the Lunch meal. The Surveyor was standing next to the sink of the unit. There was a canister of sterile wipes in the cabinet. The 6 staff were observed sanitizing their hands at the beginning of the meal. They failed to wash their hands again throughout the meal, as they served residents, transported them to their tables, adjusted the residents clothing or provided feeding assistance.

On [redacted] at 11:40 AM, the food was brought onto the unit in a cart. The staff were observed serving the 34 residents present. There was one table designated for residents who required assistance with eating. There were 4 residents sitting at this table. One resident #9 was able to eat without assistance. The food for 3 residents were delivered to this table at 11:45 AM. Staff D was asked about the plate for Resident #9. She stated she would check on the plate. There were 3 staff seated feeding the 3 residents at this table. Resident #9 was observed licking her soup cup with her fingers while waiting on her food. She was unable to be interviewed due to her [redacted] level. The Surveyor asked Staff D at 12:15 PM about the Resident's plate. She responded "We forgot about her." The Surveyor checked the serving pans of the food given to this resident. The food was no longer hot.

On [redacted] at 09:30 AM, an observation of the Breakfast meal. The Surveyor stepped inside the dining [redacted] the Memory Care Unit. There was a foul odor permeating the air that appeared to be the smell of feces. The Surveyor remained approximately 10 minutes before the staff removed a resident from the dining [redacted] the Surveyor entered the center of the dining [redacted]. It was unknown how long the resident had been sitting in the dining [redacted].

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On [redacted] at 10:00 AM, an interview was conducted with the Nursing Supervisor (Registered Nurse). She acknowledged the findings. She stated she would address the issues with her staff.

Class III

**0181 - Emergency Plan Approval - 58A-5.026(2) FAC**

Based on interview and record review, the facility failed to ensure the Comprehensive Emergency Management Plan (CEMP) was submitted and approved in a timely manner by the local emergency management agency.

The findings included:

On [redacted] a review of the facility records revealed that the previous CEMP form was dated [redacted]. The plan year was dated [redacted] 1 - [redacted], 2017. The CEMP was approved through [redacted], 2018. The next plan review date was [redacted]. This allows for a 60 days review period established by Florida Statutes before the CEMP expires.

Further review of the documentation revealed a receipt from the local emergency management agency dated [redacted]. The receipt revealed the facility failed to apply 60 days prior to their expiration date of [redacted].

On [redacted] at 10:30 AM, an interview was conducted with the Administrator. She acknowledged the findings. She stated they were delayed in submitting their CEMP due to last year's Hurricane. Therefore, the facility was unable to provide documentation indicating the facility CEMP was approved

Class III