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
	AL11966659	A. BUILDING: _____ B. WING _____	06/29/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JAMAICA SHORES	171 SW EULER AVE PORT SAINT LUCIE, FL 34953

(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 An unannounced Relicensure and Generator Monitoring survey was conducted on at Jamaica Shores. A deficiency related to the relicensure was identified at the time of the survey.	A 000		
A 092	59A-36.012(1) FAC Food Service - General Responsibilities (1) GENERAL RESPONSIBILITIES. When food service is provided by the facility, the administrator, or an individual designated in writing by the administrator, must be responsible for total food services and the day-to-day supervision of food services staff. In addition, the following requirements apply: (a) If the designee is an individual who has not completed an approved assisted living facility core training course, such individual must complete the food and nutrition services module of the core training course before assuming responsibility for the facility's food service. The designee is not subject to the 1 hour in-service training in safe food handling practices. (b) If the designee is a certified food manager, certified dietary manager, registered or licensed dietitian, dietetic registered technician, or health department sanitarian, the designee is exempt from the requirement to complete the food and nutrition services module of the core training course before assuming responsibility for the facility's food service as required in paragraph (1)(a) of this rule. (c) An administrator or designee must perform his or her duties in a safe and sanitary manner. (d) An administrator or designee must provide regular meals that meet the nutritional needs of residents, and therapeutic diets as ordered by the resident's health care provider for residents who	A 092		

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A 092	Continued From page 1 require special diets. (e) An administrator or designee must comply with the food service continuing education requirements specified in rule 59A-36.011, F.A.C. This Statute or Rule is not met as evidenced by: Based on record review, observations, and interviews, it was determined that, the facility failed to ensure all menus were reviewed and approved by a Dietician on an annual basis. The facility also failed to offer a variety of meals to meet the nutritional needs of the residents residing in the facility. It was further determined that the facility failed to ensure all menus were dated and planned at least one week in advance for both regular and therapeutic diets. The findings include: During an interview with the Administrator at 10:15 AM on , the facility's menus approved by a Dietician were requested. The Administrator provided a one-page document titled "Jamica Shores Menu." Review of this document revealed it contained a three-day menu repeated for seven days. Further review revealed residents were served the same menu items throughout the week, and the same menu was repeated throughout the entire month. During interview, the Administrator stated she uses the same menu every week and does not offer any variety or substitutions. It was also noted that the menu's approval date and expiration could not be determined, as only a date of was listed. The Administrator confirmed that she uses this one-page cycle menu for all four weeks of the month. an observation of the lunch meal service revealed the facility had six residents, including one	A 092		

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A 092	Continued From page 2 resident (Resident #2) who required a therapeutic puree diet. Observation revealed Resident #2 was served only broccoli soup in a mug, with no additional food items provided. Review of Resident #2's record revealed the resident is receiving hospice services and is ordered a puree diet, as documented on the Resident #2 1823 Health Assessment. on at 2:45 PM, the Administrator was informed of the concerns noted and identified. She stated she was not aware of the problem and acknowledged she had used the same menu for years. She was unable to provide proof that the menu had been approved within the past year and that a variety of choices/selection were offered. During an exit interview at 3:30 PM on , the Administrator was informed of the findings. No additional documents were provided. Class III	A 092		