

MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 61WG	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/19/2023
NAME OF PROVIDER OR SUPPLIER WISTERIA GARDENS		STREET ADDRESS, CITY, STATE, ZIP CODE 5420 HIGHWAY 80 EAST PEARL, MS 39208		
(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
M 000	Initial Comments The State Agency (SA) conducted an annual recertification survey at the facility from 10/16/2023 through 10/19/2023. During the survey, the SA determined the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements and cited M815.	M 000		
M 815	45.29.1 Safe Food Handling Procedures Safe Food Handling Procedures. Food shall be prepared, held, and served according to current Mississippi State Department of Health Food Code Regulations. This Statute is not met as evidenced by: Level II Based on observation, staff interviews, and facility policy review, the facility failed to ensure items in the kitchen refrigerators, freezers, and the dry storage room were dated, labeled, and discarded by the expiration date for one (1) of three (3) dietary observations. This has the potential to affect all residents receiving meals prepared by the facility's dietary department. Findings include: Review of the facility's policy titled, "Food Storage (Dry, Refrigerated, and Frozen)" dated 2016, revealed, ... "Discard food that has passed the expiration date, and discard food that has been prepared in the facility after seven days of storing under proper refrigeration ..." An observation of the kitchen on 10/16/2023 at 9:15 AM, with the Dietary Manager (DM),	M 815	1) The Dietary Manager was in-serviced on 10/16/2023, by the Administrator, on the proper way to store, label and discard food. The dietary staff immediately discarded expired, non-labeled and improperly stored food items. 2) All residents have the potential to be affected by this deficient practice. 3) All dietary staff was in-serviced on the policy and procedures for proper food storage, labeling and disposal on 11/1/2023. 4) The Dietary Manager will conduct checks of the refrigerators, freezers and dry storage rooms weekly x 6 weeks. The first weekly check will be 10/30/2023. The Administrator will complete audits once a week x 6 weeks to ensure proper storage, labeling and disposal of food	11/30/23

Mississippi State Department of Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

11/06/23

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M 815	Continued From page 1 revealed several expired food items. There were three (3) 46 ounce (oz). cartons of Lyons Ready Care cranberry cocktail, with a received date of 11/22/22, and an expiration date of 2/23. There were six (6) 24 oz. bottles of Hershey's chocolate syrup, with an expiration date of 9/23. One of the Hershey chocolate syrup bottles had been opened, with approximately 1/3 of the syrup remaining in the bottle. The opened bottle was labeled with an open date of 5/27/22. There were three (3) 46 oz. cartons of Lyons orange juice, with an open date of 4/29/22, and an expiration date of 7/12/22. There was a one (1) gallon jug of Worcestershire Sauce, with an open date of 2/11/22, and an expiration date of 5/20/22. Additionally, there were eight (8) frozen pancakes wrapped in plastic wrap, without a name or date on it. During an interview with the DM on 10/16/23 at 9:50 AM, she revealed that in their facility, the DM is responsible for discarding expired foods. The DM confirmed that if residents were served expired foods, they could get sick. On 10/19/23 at 12:18 PM, in an interview with the Assistant Administrator, she confirmed that the expired foods should have been discarded, as serving expired foods to residents could cause foodborne illnesses.	M 815	items and to ensure the weekly checks are being completed. The first weekly audit will be 11/1/2023. Audits will be reviewed weekly by the Quality Assurance Committee, made up of the Medical Director, Administrator, Director of Nursing, and Corporate Nurse, until such time consistent substantial compliance has been achieved as determined by the committee. Weekly QA reviews will take place every Wednesday, beginning on 11/8/2023, in order to review results of each weekly audit. The QA Committee will meet on 11/30/2023 to review all findings of the audits.	