

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/13/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 255247	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 12/21/2021
NAME OF PROVIDER OR SUPPLIER REST HAVEN HEALTH AND REHABILITATION			STREET ADDRESS, CITY, STATE, ZIP CODE 103 CUNNINGHAM DRIVE RIPLEY, MS 38663		
(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) COMPLETION DATE	
F 000	INITIAL COMMENTS The State Agency (SA) conducted a complaint survey for CI MS# 17645 at the facility from 12/20/21 to 12/21/21. The SA determined the facility was not in compliance with the requirements for participation in Medicare and Medicaid. The SA did not substantiate the complaint related to admission/discharge/transfer and falsification of records. The SA did substantiate the complaint related to stale bread served to residents and cited F 812. The facility had a census of 37 at the time of the survey and was licensed for 60 beds.	F 000			
F 812 SS=F	Food Procurement,Store/Prepare/Serve-Sanitary CFR(s): 483.60(i)(1)(2) §483.60(i) Food safety requirements. The facility must - §483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities. (i) This may include food items obtained directly from local producers, subject to applicable State and local laws or regulations. (ii) This provision does not prohibit or prevent facilities from using produce grown in facility gardens, subject to compliance with applicable safe growing and food-handling practices. (iii) This provision does not preclude residents from consuming foods not procured by the facility. §483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety. This REQUIREMENT is not met as evidenced by: Based on observation, staff interview and facility	F 812	Food Procurement, Store/Prepare/Serve-	1/19/22	

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

TITLE

(X6) DATE

Electronically Signed

01/07/2022

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 812	Continued From page 1 policy review the facility failed to store and serve food in accordance with professional standards of food service safety for two (2) of two (2) dietary tours. Review of the facility policy titled," Sanitation and Infection Control" revealed the facility ensures the quality and safety of refrigerated foods stored outside the dining service area through accepted storage practices. Procedure #5 revealed all temperature-controlled foods and ready to eat foods will be labeled. Information included in the label: a. Name of food b. Date and time of storage c. Date by which it should be eaten or discarded (USE BY DATE) . Number 6. C. revealed, Food items that have passed the use by date, expiration date, or are not labeled are discarded. An observation, on 12/20/21 at 1:10 PM revealed the bread being used in the dietary department had a date of 12/9/21 written on the plastic bag in black marker. The shelf contained 21 loaves of bread and 9 bags of hot dog buns. There was no indication if this date was a use by or expiration date on the bags. There were four open bags on the shelf with three to nine slices of bread in each of them. There was no open date or expiration date on the bread. An observation revealed a tray in the white refrigerator with 21 sandwiches and 12 sandwiches in the gray refrigerator. No visible mold was observed on the bread. An interview, on 12/20/21 at 1:30 PM with the Dietary Manager (DM) revealed that they receive their bread frozen and the 12/9/21 date was when they took it out of the freezer to thaw for use. She	F 812	Sanitary - All bags of bread out of date were discarded once identified. Administrator immediately in-serviced Dietary Manager on 12/21/21 on facility standards for Recommended Food Storage, Sanitation, and Infection Control Storage of Refrigerated and Refrigerated Equipment from Facilities Nutritional Service Standard on storage time for bread stored at room temperature. All other dietary staff were immediately in-serviced on 12/21/21 by Dietary Manager on facility standards for Recommended Food Storage, Sanitation and Infection Control Storage of Refrigerated and Refrigerated Equipment from Facilities Nutritional Service Standard on storage time for bread stored at room temperature. - The facility has determined that all residents who consume bread by mouth have the potential to be affected by deficient practice of not dating bread after being opened and not discarding bread after expiration date. - Dietary Manager will log in all bread received from vendor onto spreadsheet starting on 12/30/21. Dietary staff will look for dates on bread		

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F 812	Continued From page 2 confirmed that the bread did not have an expiration date on it. She stated that they keep a check on the bread, and when they open it if it smells or feels dry, they discard it. The DM sated that she was not aware of any resident complaints about the bread. The DM stated after review of the recommended food storage chart that the bread kept at room temperature should have been discarded on 12/16/21. An interview, on 12/20/21 at 2:45 PM with Resident #2 revealed that the bread was usually fresh, but when it isn't he tells the dietary staff and they take care of it. An interview, on 12/20/21 at 2:50 PM with Resident #4 revealed that the bread was hard most of the time. She stated that she thinks everybody has complained about it. She stated that she microwaves hers to soften it. An interview, on 12/20/21 at 2:55 PM with Resident #1 revealed that the bread they are served is always hard when they get it. An interview with the DM on 12/20/2021 at 4:23 PM revealed that using old bread could cause dissatisfaction from the residents and could cause them to get sick if the bread had molded. An interview, on 12/20/21 at 4:57 PM with the Administrator (ADM) revealed that he was not aware of issues with the bread. The ADM confirmed that the bread should have an expiration date on it because out of date bread could be dissatisfying to the residents.	F 812	bag before serving any resident to ensure bread is not out of date. The dietary manager/administrator will complete a weekly audit of bread using the sanitation score card/spreadsheet starting 12/30/21 for 30 days to monitor date items are opened and any for expired items and will continue monthly audits for 90 days completing audits on April 30, 2022, to ensure compliance with the standard and not serve out of date bread. Any concerns noted will be corrected immediately by the dietary manager/administrator. The dietary manager will bring the scorecard results and any identified concerns to the Quality Assurance Committee during the monthly meetings beginning 1/13/22 and will continue to be reviewed monthly at least until the April 2022 Quality Assurance Meeting or until no other issues are identified. The Interdisciplinary team /Quality Assurance Committee consists of the Administrator, the Director of Nursing, Unit Manager, Dietary Manager, the Infection Control Preventionist/ Nurse Educator, Medical Records Nurse, Social		

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F 812	Continued From page 3 An interview, on 12/20/21 at 4:59 PM with the Director of Nursing (DON) revealed that if the bread should have been discarded on 12/16/21, it probably was stale and not satisfactory to the residents. She stated that it could possibly cause illness of the residents. Record review of the facility dietary manual titled, "Nutritional Services Standard ", revised November 2019 revealed in the "Tool Kit" section revised October 2019 that the recommended storage time for bread stored in the pantry at room temperature was five (5) to seven (7) days.	F 812	Service Director, Activity Director and Medical Director at a minimum.		