STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	25A374	A. BUILDING _____ B. WING _____	C 05/12/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NOXUBEE COUNTY NURSING HOME	78 HOSPITAL RD MACON, MS 39341

(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 from 5/11/21 to 5/12/21. During the survey, the SA determined that the facility was not in compliance with the requirements for participation in Medicare and Medicaid. The SA substantiated the complaint for MS #16646 related to the physical environment and dietary services. The SA cited deficiencies F812 and F 925. The SA did not substantiate MS #17060 for injury of unknown origin, and no deficiencies were cited. The facility was licensed for 60 beds and had a census of 56 at the time of the survey.	F 000		
F 812 SS=E	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	F812: Food Procurement,	6/30/21

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Electronically Signed | 06/24/2021

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F 812	Continued From page 1 policy review, the facility failed to provide a clean and sanitary kitchen for two (2) of three (3) tours of the dietary department. The facility policy titled "Storage of Refrigerated Food",dated 10/17 revealed, "The facility ensures the quality and safety and sanitation of refrigerated foods through accepted storage practices...5. All open foods are labeled with common name of food, date stored and use- by-date. 6. Time and temperature control (TCS) foods held at forty-one (41) degrees Fahrenheit or lower may be stored for seven (7) days." The facility policy titled "Employee Work Practices", dated 10/17 revealed "Food service employees shall follow sanitary practices to prevent the spread of foodborne illnesses...4. Food service employees are not allowed to eat or drink in the food and nutrition services department except when tasting food to evaluate quality. A drink from a covered container with a straw may be used if kept out of the food preparation area." The policy titled, "Food Storage Labeling", dated 10/17, revealed "The facility will ensure the safety and quality of food by following good storage and labeling procedures...1. All food items must be labeled with the date they are received... Time and temperature control (TCS) foods can be stored for seven days if held at forty-one (41) degrees Fahrenheit or lower." On 5/11/21 at 10:35 AM, an observation with the Dietary Manager (DM) revealed one half (½) gallon opened container of buttermilk with an expiration date of 4/24/2021. A five (5)-pound container of sour cream one eighth (1/8th) full,	F 812	Store/Prepare/Serve-Sanitary The following refers to the storage of refrigerated foods: 1. A: All items/foods in the refrigerator was inventoried, checked for expiration date, and labeled to include date stored and use by date on 5/11/21. All expired items were disposed of on 5/11/21. B: All dietary staff were in-serviced on 5/19/21 by Dietary Manager on proper storage of refrigerated food to ensure the facility follows all safe practices to provide safe and quality foods 2. All resident have the potential to be affected by the deficient practice. 3. A: Dietary Manager will appoint a dietary staff member who will be responsible for checking the refrigerator twice a day to ensure all food are stored with proper expiration date and labels. Dietary Manager created a log form to be placed on the refrigerator door to document the twice daily checks by Dietary Staff on 5/20/21. B: All Dietary Staff will attend a Directed In-Service training on Store/Prepare/Serve-Sanitary-Safe Handling Procedures including proper labeling/storage of refrigerated foods on 6/30/21. The Directed In-Service will be conducted by Nutrition Systems Registered Dietician whom is not involved with care of the residents of this facility. C: Dietary manager will conduct a	

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F 812	Continued From page 2 and two un-opened 5-pound containers of cream cheese.One of the containers of cream cheese had a best if used by date of November 2020 and the second container of cream cheese had a best if used by date of January 2021. On 5/11/21 at 11:45 AM, an observation of the food prep tabletop in the kitchen revealed an open container of energy drink. Dietary Staff #2 confirmed the opened can of energy drink belonged to her and that she should not have it in the food prep area. On 05/11/21 at 2:00 PM, an interview with the DM revealed the out of date items could contribute to a foodborne illnesses, lack of taste quality, and possible loss of appetite and that the expired items should have been discarded. On 5/11/21 at 2:15 PM, an interview with Dietary staff #2 revealed that having personal open cans of drink in the kitchen could result in a spill and could spread germs. Dietary staff #2 confirmed she was not supposed to have personal food or drink in the kitchen. On 05/11/2021 at 3:50 PM, in an interview with RegisteredNurse (RN) #1 confirmed there had not been any outbreaks of foodborne illnesses in the facility. On 05/12/2021 at 12:10 PM, in an interview with the Administrator revealed she had not previously been aware of the problems in the kitchen, such as, outdated foods in refrigerator until yesterday.	F 812	bi-weekly audit beginning 6/30/21 for 6 months of the dating and labeling of foods stored in the refrigerator to ensure that the dietary staff are dating and labeling food properly. D: Registered Dietician will inspect storage of refrigerated items starting 6/1/21 and monthly times 6 months to ensure compliance with proper storage. 4. The Dietary Manager/Registered Dietician will report the findings of their audits monthly times twelve months to the Administrator and to the Quality Assurance Performance Improvement committee to ensure compliance with proper food storage. The Quality Assurance Performance Improvement committee will review findings starting 6/28/21 of their audit and make any further recommendations as needed. The Administrator/Dietary Manager will be responsible to ensure compliance. Employee Work Practices/Eating drinking in Dietary Department 1. A: The open container was removed from dietary department on 5/11/21. The Dietary Employee with the open container was counseled by Dietary Manager on 5/11/21. B: All dietary staff were in-serviced on 5/19/21 on facility policy(Employee Work Practices) that states Food Service Employees shall follow sanitary practices to prevent the spread of foodborne illness which states that employee are not	

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F 812	Continued From page 3	F 812	allowed to eat or drink in the food area and nutrition department except where testing food to evaluate quality. 2. All Residents have the potential to be affected by the deficient practice 3. A: All Dietary Staff will attend a Directed in-service training on Safe/Sanitary work practices including eating and drinking in the dietary department on 6/30/21. The Directed In-service will be conducted by Nutrition System Registered Dietician whom is not involved with the care of the residents of this facility. B: Dietary Supervisor or designee will monitor all dietary staff on a daily basis and document findings starting 6/30/21 daily times six months for any staff not following facility policies on safe sanitary practices including eating or drinking in dietary department area. C: Any Dietary Staff found to be non-compliant with these safe practices including eating or drinking in the dietary department area will be counseled at that time according to the facility personal policy. D: Dietary Manager will conduct in-services for all Dietary Staff on facility policies related to safe employee work practices including eating and drinking in the dietary department starting 5/19/21 and will be held at least quarterly for a year and as needed. E: Dietary Manager will document any incident where a dietary employee is	

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F 812	Continued From page 4	F 812	found to be deficient in following safe work practices including but not limited to eating or drinking in the kitchen area. 4. Dietary Manager will report the findings to the Administrator/Quality Assurance Performance Improvement committee monthly times six months and re-evaluate starting 6/28/21. The Administrator will be responsible to ensure compliance.	
F 925 SS=F	Maintains Effective Pest Control Program CFR(s): 483.90(i)(4) §483.90(i)(4) Maintain an effective pest control program so that the facility is free of pests and rodents. This REQUIREMENT is not met as evidenced by: Based on observation, staff interview, and facility policy review, the facility failed to maintain an effective pest control program as evidenced by, flies observed in the kitchen for three (3) of three (3) tours of the kitchen. The facility policy titled, "Pest Control Program", dated 02/2020, revealed, "It is the policy of this facility to maintain an effective pest control program that eradicates and contains common household pests and rodents.Definition: "Effective pest control program" is defined as measures to eradicate and contain common household pest(e.g.bed bugs, lice, roaches, ants, mosquito's, flies, mice, and rats... Facility will maintain a report system of issues that may arise in between scheduled visits with the outside pest service and treat as indicated. Facility will utilize a variety of methods in controlling certain seasonal pest, i.e. flies. These will involve indoor and outdoor	F 925	F925 Maintains Effective Pest Control Program 1. A: The commercial door fly fan was turned on 5/11/21 at the outside entrance to the kitchen. The commercial fly fan was also turned on to the back door of nursing home and to the front door of nursing home on 5/11/21. B: The fly trap light was turned on in the kitchen on 5/11/21. C: The pest control service company was notified and the facility was treated for pest on 5/18/21. The pest control company services the Nursing Home monthly and as needed for any pest problems identified. D. The facility including the kitchen will be monitored for pest and flies daily	6/30/21

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F 925	Continued From page 5 methods that are deemed appropriate by the outside pest service and the state and federal regulations..." The policy titled, "Pest Control", dated 08/17, revealed" In order to maintain a safe sanitary environment, a pest management program is used to prevent pests from entering the food and nutrition service department and to implement measures to eliminate any pest infestations...Procedure:b). All windows and vents are screened. Patch and replace when needed.c.) Self-closing devices on all outside doors...e.) Keep all exterior openings closed tightly. f)If flies are a problem, consider installing air curtains above or alongside the exterior doors..." An observation, on 5/11/21 at 10:35 AM, of the kitchen revealed four (4) flies located on a pole connected to the food service steam table, one (1) fly flying around kitchen and one (1) fly located on the side of a cabinet, a total of six (6) flies. An observation, on 05/11/21 at 10:45 AM, revealed the kitchen door leading to the outside of the building was propped open approximately two (2) and one half (½) inches with a piece of red brick.The DM closed the door. An observation, on 05/11/21 at 11:30 AM, of the kitchen revealed nine (9) flies located on a pole connected to the food service steam table, two (2) flies in the air and one (1) fly located on the side of a cabinet in the kitchen, a total of twelve (12) flies. An observation, on 05/11/21 at 11:35 AM, revealed the outside door was propped open	F 925	starting 5/12/21 for six months by all staff and any pest issues identified will be reported to the housekeeping supervisor who will contact the pest control company as needed. E. The maintenance department treated the outside area all around the building with fly bait on 5/28/21. F: Fly traps will be placed near outside entrances including kitchen entrance by the maintenance department by 5/25/21. G: The outside door to the kitchen that was found propped open with a brick was closed and the brick was removed from use on 5/11/21. 2. All residents have the potential to be affected by this deficient practice. 3. A: The commercial door fly fan was turned on 5/11/21 and will remain on for 365 days a year and will not be turned off. B: The fly trap light that was not turned on in the kitchen area was turned on 5/11/21 and will remain on for 365 days a year in the kitchen area and will not be turned off. C: The pest control company contracted will service our facility monthly and as needed for any pest problems identified. The pest control company serviced the facility on 5/18/21 and will continue to service the nursing home monthly and as needed for any problems identified. D: On 5/28/21 the maintenance department treated the outside area around the nursing home building with fly	

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F 925	Continued From page 6 again two (2) and one half (1/2) inches open with a piece of red brick. An observation, on 05/12/21 at 11:30 AM, of the kitchen revealed two flies moving around on the pole connected to the food service steam table with food in containers on the table for meal time tray prep. During an interview on 05/11/21 at 10:50 AM, with the Dietary manager (DM), she stated that her staff knew better than this.(propping doors open). The DM removed the brick and closed the door. The DM stated that leaving this door open could cause bugs to come inside. An interview on 5/11/21 at 2:00 PM, with the DM revealed a fly bug light would help. The DM stated that the facility has one but, it is out of order. The DM also stated that she has seen what looks like a roach in the dish room on the floor a few times. An interview on 5/11/21 at 2:45 PM, with Dietary Staff (DS) #1 revealed that the staff leaving outside door propped open could allow anything to come in; dogs, cats, flies,or anything. An interview on 05/11/2021 at 4:30 PM, with Housekeeping/Maintenance (#2) revealed the facility uses a pest control company that comes to spray at least monthly and will make extra visits if called between the monthly visits. An interview on 05/12/2021 at 08:45 AM, with Housekeeping/Maintenance (HM) #1, confirmed the fly trap in the kitchen was not working at the time of survey. HM #1stated they usually do not turn the door fan on until it is fly season. When	F 925	bait and will continue treatments weekly for 6 months. E: On 5/25/21 the fly traps were hung by maintenance department near all outside entrances and shall be checked monthly times 6 months and replace as needed. F: The entrance door to the kitchen will be monitored ensuring it is kept closed and not propped open by the Dietary Manager/Administrator daily starting 5/12/21 times 6 months. 4. The Dietary Manager/Administrator will report findings to the Quality Assurance Performance Improvement Committee monthly starting June 28, 2021 times 6 months then quarterly and as needed and re-evaluate as needed. The Administrator will be responsible to ensure compliance.	

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F 925	Continued From page 7	F 925		

asked how you determine fly season he reported usually when the weather gets warm. Most of the time the door fans are usually turned on around March. He stated he was not aware the fan was not turned on.

An interview, on 05/12/21 at 11:35 AM, with DS #1, confirmed two flies located on the pole connected to the food service steam table. She stated that she guessed the light had not had time to get all the flies that were here yesterday.

An interview, on 05/12/2021 at 12:10 PM, with the Administrator (ADM), revealed she had not previously been aware of the problems in the kitchen until yesterday. The ADM stated that she was not aware of flies in the kitchen, or staff propping the outside door open. The Administrator stated that flies in the kitchen could spread disease.