

MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 22CI	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 12/06/2019
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

GRENADA REHABILITATION AND HEALTHCARE CEN **1966 HILL DRIVE**
GRENADA, MS 38901

(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 a complaint survey, MS #16398, from 12/05/19 - 12/06/19. During the survey, the SA substantiated the complaint related to food services and determined the facility was not in compliance with State Licensure Regulations for the Aged or Infirm, and cited State Statutes at M815 and M970.	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 policy/procedure review, observation, and interview, the facility failed to serve food in accordance with professional standards for food service safety for 85 of 98 residents as evidence by on 12/5/19 the foods being served were below safe temperatures during the dinner meal service affecting all halls and all units of the facility. Findings include: Review of the facility's "Food: Preparation" policy, with a revision date of 9/2017, revealed: All foods are prepared in accordance with the FDA (Food and Drug Administration) Food Code. Procedure 2. Dining Services staff will be responsible for food preparation procedures that avoid contamination by potentially harmful physical, biological, and chemical contamination. 4. The Dining Services Director/Cook(s) will be	M 815	1. On 12/5/2019 the Dietary Manager arrived to the facility at 5:51 PM and checked the food temperatures for dinner serviced. The dietary staff re-heated shredded chicken to 168 degrees, black beans to 181 degrees, and rice to 175 degrees at approximately 5:55 PM then served to the twenty-two (22) residents on the A-Wing hall for dinner on 12/5/2019. Eighty-five (85) residents who receive meals from the kitchen were assessed by the Assistant Director of Nursing at 10:00 AM on 12/6/2019 and no S/S of food borne illnesses were identified. Dietary Staff was in-serviced on 12/5/2019 by the Dietary Manager on proper procedures of checking food temperatures, calibrating the thermometer to ensure residents receive food at the appropriate temperatures and checking and recording food temperatures in the binder on the	1/6/20

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

TITLE

(X6) DATE

Electronically Signed

12/27/19

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M 815	Continued From page 1 responsible for food preparation techniques which minimize the amount of time that food items are exposed to temperatures greater than 41 degrees Fahrenheit (F) and/or less than 135 F, or per state regulation. 10. Time/Temperature Control for Safety (TCS) hot food items will be cooked to a minimum internal temperature for 15 seconds, as follows: Poultry and stuffed foods 165 F, Ground meat 155 F, Fish, pork, other meats 145 F, Unpasteurized eggs 145 F. 13. All foods will be held at appropriate temperatures, greater than 135 F (or as state regulation requires) for hot holding, and less than 41 F for cold food holding. 14. Temperature for (Time/Temperature Control for Safety) TCS foods will be recorded at time of service, and monitored periodically during meal service periods. Observation on 12/5/19 at 5:05 PM, revealed residents were eating in the dining room buffet style. Each plate was prepared by Dietary Staff (DS) #2 and served to the residents. The meal consisted of chicken tacos, black beans, corn, salad, and fruit. Observation on 12/5/19 at 5:51 PM, revealed the Dietary Manager (DM) was asked to check food temps of the food on the steam table. The Fahrenheit (F) degree of the temperatures included: Chicken 145, Black Beans 172, Corn 129, Lettuce 55, Pureed Black beans 123, Pureed Corn 100, Pureed Chicken 111, Pork Chops 105, Candied Yams 168, and Mashed Potatoes 134. Interview with Resident #2 on 12/5/19 at 5:08 PM, revealed his food was sometimes cold, but he had not asked staff to re-heat the food. Interview with the DM at 5:51 PM on 12/5/19,	M 815	steam table. Dietary staff completed return demonstration of calibrating thermometer and checking food temperatures with the Dietary Manager. 2. Eighty-five (85) residents who receive meals from the kitchen have the potential to be affected. 3. The contract dietary services provider Regional Manager educated Dietary Manager on requirements of checking temperatures of food to ensure food is served at safe and appetizing temperatures, logging temperatures, reviewing temperatures recorded by other dietary staff and ensuring dietary staff are appropriately trained on 12/9/2019. Eight (8) Dietary Staff members completed return demonstration of calibrating thermometer and checking temperatures with the Dietary Manager on 12/9/2019. Newly hired dietary staff will be trained during orientation in regards to calibrating thermometers and checking food temperatures. 4. Beginning 12/16/2019 the Dietary Manger will audit food temperatures, check binder on the steam table to review temperatures being logged and that temperatures are at proper temps daily five (5) times a week for four (4) weeks, then weekly for four (4) weeks and monthly for three (3) months to ensure food temperatures are being tested and documented. Audits will be conducted in the dietary department and on random delivery carts on the halls. Beginning 12/16/2019 the Dietary Manager will	

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M 815	Continued From page 2 while he was checking the food temps, revealed the Chicken temperature should be at 160, corn at least 140-150, lettuce between 40-50, and mashed potatoes at least 150. Interview with the DM at 6:00 PM on 12/5/19, revealed "No, I didn't check the temps before I left. I'm short handed and I got to be back here in the morning for the delivery truck. Usually all of my cooks are trained to check my food temps." Interview on 12/5/19 at 5:25 PM, with Dietary Staff (DS) #1 revealed she is a cook and did not know how to check the food temperatures on the steam table. DS #1 stated the DM checked the temperatures. Interview with DS #2 on 12/5/19 at 5:28 PM, revealed she didn't know how to check food temperatures on the steam table. Interview with DS #1 at 5:37 PM on 12/5/19, revealed "I always have the steam table on and keep the food hot before I put it on the steam table. I also sample the food to ensure it's hot enough. I'm not saying I've seen (Name of Dietary Manager) check the food temps. No, I don't know who checked the temps tonight. No, I don't know where the food temp log is. I see (Name of Dietary Manager) look at the food but I'm busy. No I've never seen him put a thermometer in the food." Interview with the Registered Dietician (RD), on 12/6/19 at 2:05 PM, revealed the Dietary Aides should know the holding temperatures of the food and the cooks should know how to calibrate the thermometer and check the food temperatures of the food she cooks.	M 815	observe dietary staff during tray line daily five (5) times a week for four (4) weeks, then weekly for four (4) weeks and monthly for three (3) months to ensure thermometers are calibrated correctly and food temperatures are checked. Findings of audits will be reported to the Quality Assurance Performance Improvement Committee by the Assistant Director of Nursing for three (3) months for review and recommendations. The Administrator is responsible for on-going monitoring and compliance.	

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M 970	Continued From page 3	M 970		
M 970	45.33.4 Control of insects, rodents, etc. Control of insects, rodents, etc. The facility shall be kept free of ants, flies, roaches, rodents, and other insects and vermin. Proper methods for their eradication and control shall be utilized. This Statute is not met as evidenced by: Level II Based on observation, policy/procedure review, and interview the facility failed to ensure the facility kitchen was pest free for one (1) of three (3) observations during two (2) days of survey, as evidence by on 12/5/19, during the evening meal tray set up, black ants were noted crawling on the tea/coffee preparation table, the wall behind this table, and on the cabinets behind the steam table. Findings include: Review of the facility's "Pest Control" policy last revised May 2008, revealed the facility would maintain an effective pest control program. On 12/5/19 at 5:50 PM, during observation of meal tray set up, numerous black ants were noted crawling on the coffee/tea preparation table, on the wall behind this table, and on the cabinets behind the steam table. There were four (4) ants noted dead. Four (4) full pitchers of tea were noted on the table where the ants were crawling. Coffee cups and tea/water pitchers were noted on the cabinets, where ants were crawling. Interview with Dietary Staff (DS) #1 on 12/5/19 at 5:50 PM, revealed, "I've just seen these ants today. I tried to wipe them up, but they keep	M 970	1. The Dietary Manager cleaned and disposed of the black ants on 12/5/2019 at approximately 6:00 PM. The Maintenance Director treated the kitchen for pest on 12/6/2019. The contracted pest control service provider treated the kitchen on 12/9/2019; no pest noted on their report. Eighty-five (85) residents who receive food from the kitchen were assessed by the Assistant Director of Nursing on 12/6/2019 at approximately 9:30 AM and no residents were affected by the alleged deficient practice. 2. Eighty-five (85) residents who receive meals from the kitchen have the potential to be affected. 3. The facility staff was in-serviced on 12/6/2019 by the Maintenance Director on reporting any signs of pest immediately to ensure facility is treating for pest. Contract pest control service will continue to treat kitchen for pests on a monthly basis and as needed. On 12/9/2019 a pest log was initiated and dietary staff were educated to document on the pest log any indications of pest in the dietary department. 4. Beginning 12/16/2019 the Maintenance Director will inspect the dietary department	1/6/20

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M 970	Continued From page 4 coming back." Interview with the Dietary Manager (DM) on 12/6/19 at 10:15 AM, revealed Maintenance had put ant bait out for ants that morning. Review of an invoice from the local pest control company, dated 11/20/19, revealed the kitchen had been sprayed and glue traps put out, related to American roaches noted in the kitchen and storage area. An invoice, dated 10/17/19, also indicated roaches had been observed and the kitchen sprayed.	M 970	and review pest log daily five (5) times a week for four (4) weeks, then weekly for four (4) weeks and monthly for three (3) months to ensure kitchen is pest free. Findings of audits will be reported to the Quality Assurance Performance Improvement Committee by the Assistant Director of Nursing for three (3) months for review and recommendations. The Administrator is responsible for on-going monitoring and compliance.	