STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255156	A. BUILDING _____ B. WING _____	C 12/06/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRENADA REHABILITATION AND HEALTHCARE CENTER	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) COMPLETION DATE
F 000	INITIAL COMMENTS CI MS #16398 The State Survey Agency (SA) conducted a complaint investigation, MS #16398, from 12/5/19 to 12/6/19. The result of the investigation was substantiated for food services, with deficiencies cited at F802, F804, F812, and F925. The SA determined the facility was not in compliance with Medicare and Medicaid requirements of participation.	F 000		
F 802 SS=F	Sufficient Dietary Support Personnel CFR(s): 483.60(a)(3)(b) §483.60(a) Staffing The facility must employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, taking into consideration resident assessments, individual plans of care and the number, acuity and diagnoses of the facility's resident population in accordance with the facility assessment required at §483.70(e). §483.60(a)(3) Support staff. The facility must provide sufficient support personnel to safely and effectively carry out the functions of the food and nutrition service. §483.60(b) A member of the Food and Nutrition Services staff must participate on the interdisciplinary team as required in § 483.21(b)(2)(ii). This REQUIREMENT is not met as evidenced by: Based on record review, policy/procedure review, observation and interview; the facility failed to employ sufficient staff with the appropriate	F 802	1. On 12/5/2019 the Dietary Manager arrived to the facility at 5:51 PM and checked the food temperatures for dinner	1/6/20

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

Electronically Signed | 12/27/2019

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F 802	Continued From page 1 competencies and skill sets to carry out the functions of the food and nutrition services, for 85 of 98 residents in the facility, who received meals from the facility kitchen; as evidence by kitchen staff were untrained and unable to check the temperature of foods being served to the residents at 5:20 PM on 12/5/19, affecting all halls and all units of facility. Findings include: Review of the facility's "Food: Preparation" policy, revised 9/2017, revealed: The Dining Services Director/Cook(s) will be 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 degrees 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 degrees F, Ground meat 155 degrees F, Fish, pork, other meats 145 degrees F, Unpasteurized eggs 145 degrees F. 13. All foods will be held at appropriate temperatures, greater than 135 degrees F (or as state regulation requires) for hot holding, and less than 41 degrees 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 of the kitchen, at 5:20 PM on 12/5/19, revealed two (2) staff members prepared meal trays to be served to residents that were eating in their rooms and the trays were placed in a rolling meal cart.	F 802	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 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	

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F 802	Continued From page 2 During an interview on 12/5/19 at 5:25 PM, Dietary Staff #1 revealed she was a cook and when asked if she would demonstrate checking food temps, she stated "I am the only one here preparing trays. I can't check the temps for you. I don't know how. I can read the temps on the refrigerators but don't check food temps". When asked how she checks food temps when cooking, she stated "I don't"; she stated the Dietary Manager (DM) checked the temps. Interview with Dietary Staff #2 on 12/5/19 at 5:28 PM, revealed she prepared sandwiches and desserts. She stated, "No, I don't know how to check food temps. I also serve from the buffet in the dining room." Interview with Dietary Staff #1 on 12/5/19 at 5:37 PM, revealed she always had the steam table and kept food hot before putting it on the steam table. She stated she sampled the food to ensure it's hot enough. She stated she'd not seen the Dietary Manager check the food temps and didn't know who checked the temps tonight. She stated she didn't know where the food temp log was. She stated she saw the DM look at the food, but had not seen him put a thermometer in the food. Observation on 12/5/19 at 5:40 PM, revealed the Interim Director of Nursing (IDON) retrieved a blue binder on a shelf behind the service steam table. Review of the blue binder revealed sheets of paper where food temps would be documented. Review of the papers in the binder revealed there were dates from September 2019 through December 1, 2019. There was no sheet complete; dates were missing, meals missing, some of the forms partially filled out did not have dates. The IDON gave a copy of this binder to the	F 802	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 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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F 802	Continued From page 3	F 802		

surveyor.

Interview with the IDON, on 12/5/19 at 5:46 PM, revealed "There are more October 2019 temps logged than anything else and only one (1) for December filled out."

During an observation on 12/5/19 at 5:51 PM, the Dietary Manager (DM) arrived to the facility and was asked to check food temps of the food on the steam table. The Fahrenheit (F)temperature degrees were observed: 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 the DM on 12/5/19 at 5:51 PM, while he was checking the food temps, revealed the chicken temperature should be about 160 degrees, corn temperature at least 140-150 degrees, lettuce between 40-50 degrees, and mashed potatoes at least 150 degrees.

Interview with the DM on 12/5/19 at 6:00 PM, 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."

Observation and interview with the IDON on 12/5/19 at 6:05 PM, revealed the DM told her "the food temp logs would be in the blue binder" and he knew there were "a lot of dates missing.".

Interview with the Registered Dietician (RD), on 12/6/19 at 2:05 PM, revealed the cooks should know how to calibrate the thermometer and check the food temperatures of the food she

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F 802	Continued From page 4 cooks. The RD stated the Dietary Aides should know the holding temperatures of the food.	F 802		
F 804 SS=F	Nutritive Value/Appear, Palatable/Prefer Temp CFR(s): 483.60(d)(1)(2) §483.60(d) Food and drink Each resident receives and the facility provides- §483.60(d)(1) Food prepared by methods that conserve nutritive value, flavor, and appearance; §483.60(d)(2) Food and drink that is palatable, attractive, and at a safe and appetizing temperature. This REQUIREMENT is not met as evidenced by: Based on record review, policy/procedure review, observation, and interview; the facility failed to provide and ensure that each resident received food served at a safe and appetizing temperature, for 85 of 98 residents who received meals from the kitchen, as evidence by serving resident food that is cold. Findings include: Review of the facility's "Food: Quality and Palatability" policy, last revised 9/2017, revealed: Food will be prepared by methods that conserve nutritive value, flavor and appearance. Food will be palatable, attractive and served at a safe and appetizing temperature. Interview with Resident #2 on 12/5/19 at 5:08 PM, revealed food can be cold sometimes when he received it. He consumed 100% of a chicken taco, soft taco shell and black beans. When Resident #2 was asked if the staff would re-heat	F 804	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 steam table. Dietary staff completed	1/6/20

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F 804	Continued From page 5 his food if he asked, he stated he had never asked. Review of Resident #2's most recent Quarterly Minimum Data Set (MDS) with an Assessment Reference Date of 11/2/19, revealed a Brief Interview for Mental Status (BIMS) score of 9, which indicated moderate cognitive impairment. Interview with Resident #3 on 12/6/19 at 11:25 AM, revealed sometimes the food is cold when served the evening meal; sometimes the rice and beans do not get cooked all the way. Review of Resident #3's most recent Quarterly MDS with an ARD of 9/19/19, revealed a BIMS of 15, which indicated no cognitive impairment. Interview with Resident #4 on 12/6/19 at 11:15 AM, revealed the food is ok, but sometimes breakfast is cold. Review of Resident #4's most recent Quarterly MDS with an ARD of 11/22/19, revealed a BIMS of 15; cognitive. Record review of the facility's "Resident's Council Meeting Minutes" dated November 6, 2019, revealed a complaint of cold food. The December 4, 2019, Council Minutes revealed two (2) residents complained of cold food. Observation on 12/5/19 at 5:51 PM, revealed the Dietary Manager (DM) arrived at the facility and was asked by surveyor to check food temps of the food on the steam table. The temperatures were observed at the following Fahrenheit (F) temperature degrees: Chicken 145, Black Beans 172, Corn 129, Lettuce 55, Pureed Black beans	F 804	return demonstration of calibrating thermometer and checking food temperatures with the Dietary Manager. On 12/6/2019 Residents #2, #3, #4, and #5's meal trays were not reheated during time of interview due to their food being served at the appropriate temperature. 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. Policy and Procedures were reviewed for calibrating the thermometer, checking food temperatures, and documenting food temperatures by the Quality Assurance and Improvement Committee on 12/6/2019 and no changes were made. Resident Council meeting was held on 12/11/2019 and again on 12/18/2019 with the Dietary Manager invited and in attendance to field and address any food	

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F 804	Continued From page 6 123, Pureed Corn 100, Pureed Chicken 111, Pork Chops 105, Candied Yams 168, Mashed Potatoes 134. Interview with the DM at 5:51 PM on 12/5/19, while he was checking the food temps, revealed the chicken temperature should be "at about 160 degrees", corn temperature at least 140-150 degrees, lettuce between 40-50 degrees, and mashed potatoes at least 150 degrees. Interview with the DM on 12/5/19 at 6:00 PM, revealed he didn't check the temps before he left the facility. He stated, "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". Record review of a blue binder, provided by the Interim Director of Nursing (IDON), revealed sheets of paper where food temps should be documented. Review of the papers in the binder revealed there were dates from September 2019 through December 1, 2019 that were not completed; dates missing, meals missing, and some of the forms were partially filled out without dates.	F 804	related concerns. Beginning on 12/6/2019, Nexion Neighbors are assigned staff making daily rounds that will ask residents, during daily rounds, if there are concerns about food; concerns are reviewed with Administrator and Dietary Manager during morning stand-up meeting. Dietary Manager provides follow-up during evening stand-down meetings. Resident Council meetings will continue to be held weekly, with Dietary Manager present, until such time Resident Council deems Dietary Manager no longer needs to attend. Dietary Manager will review findings of Resident Council food concerns with Administrator to determine further corrective plans. 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 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	

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F 804	Continued From page 7	F 804	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.	
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 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:	F 812	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.	1/6/20

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F 812	Continued From page 8 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 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	F 812	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 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.	

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F 812	Continued From page 9 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, 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	F 812	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 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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(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 812	Continued From page 10 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.	F 812		
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, 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	F 925	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	1/6/20

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255156	A. BUILDING _____ B. WING _____	C 12/06/2019

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F 925	Continued From page 11 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 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.	F 925	12/6/2019 by the Maintenance Director on reporting any sigs 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 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.	