STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255310	A. BUILDING _____ B. WING _____	C 09/14/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SILVER CROSS HEALTH & REHAB	503 SILVER CROSS DRIVE BROOKHAVEN, MS 39601

(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, CI MS #19358 on 9/14/22. 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 Dietary Services and cited F812. The facility held a license for 60 beds, with a census of 44.	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, interview, record review, and facility policy review, the kitchen was found to be unsanitary due to one (1) out of four (4) dietary	F 812	Corrective action will be accomplished by providing a safe, sanitary, and comfortable environment to assure	10/28/22

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

Electronically Signed | 09/29/2022

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F 812	Continued From page 1 aides not wearing a hairnet to prevent hair from falling into the food while preparing resident meals. This has the potential to affect all residents receiving meals from the kitchen. Findings Include: Record review of the facility provided policy titled "Nutritional Services" dated 11/28/17 stated ..."Scientific methods of food preparation shall be used to ensure safe, sanitary and efficient preparation of all meals and nourishments ..." On 9/15/22 at 10:45 AM, a telephone interview with the complainant revealed he was the son of Resident #1. He voiced concern that his father had reported to him that he had found hair in his food on a couple of occasions. On 9/15/22 at 11:30 AM, observation in the kitchen revealed that one of four dietary aides preparing food in the kitchen were not wearing hair covering. Dietary Aide #1 was standing at the steam table removing clear plastic wrap from pans of cooked foods without a hairnet or any hair covering to prevent hair from falling into the food. Dietary Aide was observed to walk to the side of the kitchen opposite the windows and put on a hair net approximately two minutes after the observation began. On 9/15/22 at 11:35 AM, in an interview with Dietary Aide #1, she revealed she had received training on safe food handling and was aware that a hair covering to prevent hair falling from into food was required. On 9/15/22 at 11:50 AM, in an interview with Resident #1, he confirmed that he had hair in the	F 812	conditions are sanitary and the environment is appropriate for all residents. " On 09/19/22, disciplinary action and one on one in-servicing was conducted with Dietary Aide # 1 regarding not wearing a hairnet to prevent hair from falling into the food while preparing residents' meals. The individual conducting the disciplinary action and in-service, Dietary Manager, was counseled on 09/20/22, by facility Administrator, specific to her duties related to assuring her staff adheres to the requirement of wearing a hairnet when preparing residents' meals. " On 09/19/22, an in-service was conducted with all dietary staff, by the dietary manager, regarding the requirement of wearing a hairnet, always when in the preparation area, to prevent hair from falling into the food while preparing residents' meals. " All residents have the potential to be affected by this deficient practice. " On 09/28/22, an additional in-service was conducted with all dietary staff, by the dietary manager, regarding the requirement of always wearing a hairnet when in the preparation area, to prevent hair from falling into the food while preparing residents' meals. " On 09/28/22 an in-service was conducted by the Administrator and Director of Nursing with the dietary manager, regarding the requirement of wearing a hairnet, always when in the preparation area, to prevent hair from falling into the food while preparing	

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F 812	Continued From page 2 food served to him at the facility "once or twice." On 9/15/12 at 1:15 PM, an interview with the Administrator revealed he expected anyone who entered the kitchen to wear hair protection to prevent hair from falling into the food. He stated he was positive all dietary staff had been provided in-service training to wear hair protection while in the kitchen. The Administrator said, "They know they are supposed to wear something to cover their hair in there (the kitchen)." Record review of the Face Sheet for Resident #1 revealed Resident #1 was originally admitted by the facility on 4/12/18 with current admission date listed as 5/04/20. He had diagnoses of Diabetes, Osteoarthritis, Chronic Kidney Disease, Morbid Obesity and Peripheral Vascular Disease. Record review of the Annual Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 8/04/22, revealed Resident #1 had a Brief Interview for Mental Status (BIMS) score of 15, which indicated no cognitive impairment.	F 812	residents' meals. This in-service focused on the responsibility of the dietary manager to assure requirements are adhered to, without exception. " Check offs will be conducted by the dietary manager beginning on 09/29/22, with supporting documentation, to assure all dietary staff are following the requirement of always wearing a hairnet, when in the preparation area, to prevent hair from falling into the food while preparing residents' meals. Check offs will be conducted daily, to include weekends, by the dietary manager and/or dietary manager's assistant for one month and then 4 days per week for one month, and latter will continue until substantial compliance has been achieved. Results of the check offs will be reviewed weekly by Administrator and/or Director of Nursing, beginning on 10/03/22. Rounds started on 10/03/22 by Administrator and/or Director of Nursing will be monitored weekly in QA meetings, for 4 weeks, completion date of 10/28/22, following completion date a QA meeting will be held after 10/28/22 to discuss findings, determine final completion date after QA discusses. " The Director of Nursing and/or Administrator will conduct rounds, beginning 10/03/22, of the dietary preparation area to assure dietary staff are adhering to the requirement of always wearing a hairnet when in the preparation area, to prevent hair from falling into the food while preparing residents' meals. Rounds will be conducted no less than 3 days per week for one month, with	

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F 812	Continued From page 3	F 812	supporting documentation, until which time substantial compliance has been achieved. " The deficiency will be reviewed in the QA meeting to be conducted on 09/30/22. The check offs conducted by the dietary manager, Administrator, and Director of Nursing will be reviewed in the QA meeting, weekly beginning October 5, 2022, and subsequently for the next 4 weeks, completion date of 10/28/22, following completion date a QA meeting will be held after 10/28/22 to discuss findings, determine final completion date after QA discusses.	