STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355108	A. BUILDING _____ B. WING _____	09/12/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SMP HEALTH - MARYHILL	110 HILLCREST DR ENDERLIN, ND 58027

(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 standard Medicare/Medicaid recertification survey started on 09/09/24 and concluded 09/12/24.	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, review of facility policy, review of manufacturer's instructions, and staff interview, the facility failed to sanitize surfaces in 1 of 1 facility dining room. Failure to ensure the concentration of quaternary (quat) sanitizing solution is within manufacturer's guidelines may result in an incorrect solution concentration, inadequate sanitization of dining room surfaces, and places residents at risk for foodborne illness.	F 812	1. Corrective Action: On 09/10/24, staff immediately dumped the mixed sanitizing solution and prepared a new solution, ensuring it was within the correct ppm range. All tables and surfaces were re-wiped down with the correctly mixed sanitizing solution before any further activities proceeded. The surveyor was present throughout this corrective action	10/7/24

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

Electronically Signed | 09/27/2024

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	355108	A. BUILDING _____ B. WING _____	09/12/2024

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F 812	Continued From page 1 Findings include: Review of the facility policy titled "Cleaning Tables and Counters" occurred on 09/11/24. This policy, revised February 2023, stated, ". . . (counters, tables), apply a 200-400 ppm [parts per million] quaternary solution with a cloth . . . making sure that the surface remains completely visibly wet for at least 60 seconds and let air dry. . . ." Review of manufacturer's instructions for Oasis 146 Multi-Quat Sanitizer identified a concentration of 150 ppm - 400 ppm active quat for effective sanitizing. Observation in the dining room on 09/09/24 at 11:40 a.m. showed a dietary staff member (#5) wiping the kitchen serving counter and dining room tables/chairs with the Oasis 146 quat sanitizing solution. When asked to test the solution, the dietary staff member (#5) tested the solution twice showing a concentration of 50 ppm. During an interview on 09/09/24 at 11:58 a.m., a dietary supervisor (#4) stated she expected staff to mix the quat solution in the correct concentration.	F 812	initiated by staff by observing steps conducted without any issues. Education was provided to everyone in the dietary department on September 12th. 2. All residents of the facility have the potential to be affected. 3.Systematic Changes: • Vendor/Product Change: We switched to a new vendor on Sept 26th, 2024 (Steins/Buckeye International, Inc.) and are moving to a different product (Buckeye Eco Sanitizer E62/S62) that simplifies the sanitizing process. This change will include removing red buckets and switching to pre-measured sanitizing bottles to ensure a consistent and accurate sanitizing solution for wiping down tables. • Training: All dietary staff will be educated on October 2nd, 2024, on our new products and the proper sanitizing procedures (countertops, kitchen equipment, tables etc.). The policy, Cleaning Tables and Counters was revised, and will be a part of the training conducted. The dietary supervisor and training specialist through Buckeye are leading this education session. Additionally, facility wide education will also be completed on October 2nd, 2024, for proper procedures on how to wipe down tables in the dining room with the new bottles that will be available. 4. Monitoring/Auditing: Weekly audits will be completed on five different staff	

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SMP HEALTH - MARYHILL	**110 HILLCREST DR ENDERLIN, ND 58027**

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F 812	Continued From page 2	F 812	members (in the dining room and kitchen) for one month to monitor sanitizing of kitchen/table surfaces with our new product and updated policy, followed by monthly audits for two additional months by the dietary supervisor. Audit results will be submitted to the Quality Assurance and Performance Improvement (QAPI) committee for review and further recommendations. 5. Compliance Date: October 7th, 2024	