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F 000	INITIAL COMMENTS The standard Medicare/Medicaid recertification survey started on 12/16/19 and concluded 12/18/19.	F 000		
F 801 SS=D	Qualified Dietary Staff CFR(s): 483.60(a)(1)(2) §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) This includes: §483.60(a)(1) A qualified dietitian or other clinically qualified nutrition professional either full-time, part-time, or on a consultant basis. A qualified dietitian or other clinically qualified nutrition professional is one who- (i) Holds a bachelor's or higher degree granted by a regionally accredited college or university in the United States (or an equivalent foreign degree) with completion of the academic requirements of a program in nutrition or dietetics accredited by an appropriate national accreditation organization recognized for this purpose. (ii) Has completed at least 900 hours of supervised dietetics practice under the supervision of a registered dietitian or nutrition professional. (iii) Is licensed or certified as a dietitian or nutrition professional by the State in which the services are performed. In a State that does not	F 801		1/22/20

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

Electronically Signed | 01/03/2020

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F 801	Continued From page 1	F 801		

provide for licensure or certification, the individual will be deemed to have met this requirement if he or she is recognized as a "registered dietitian" by the Commission on Dietetic Registration or its successor organization, or meets the requirements of paragraphs (a)(1)(i) and (ii) of this section.
(iv) For dietitians hired or contracted with prior to November 28, 2016, meets these requirements no later than 5 years after November 28, 2016 or as required by state law.

§483.60(a)(2) If a qualified dietitian or other clinically qualified nutrition professional is not employed full-time, the facility must designate a person to serve as the director of food and nutrition services who-
(i) For designations prior to November 28, 2016, meets the following requirements no later than 5 years after November 28, 2016, or no later than 1 year after November 28, 2016 for designations after November 28, 2016, is:
(A) A certified dietary manager; or
(B) A certified food service manager; or
(C) Has similar national certification for food service management and safety from a national certifying body; or
D) Has an associate's or higher degree in food service management or in hospitality, if the course study includes food service or restaurant management, from an accredited institution of higher learning; and
(ii) In States that have established standards for food service managers or dietary managers, meets State requirements for food service managers or dietary managers, and
(iii) Receives frequently scheduled consultations from a qualified dietitian or other clinically

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F 801	Continued From page 2 qualified nutrition professional. This REQUIREMENT is not met as evidenced by: Findings include: Based on staff interview, the facility failed to ensure the dietary manager received the necessary education to obtain the required qualifications to hold the director of food and nutrition for 1 of 1 dietary manager (#1). Failure to ensure qualified staff with the appropriate competencies and skill sets to carry out the functions of the food and nutrition services has the potential to result in adverse outcomes to residents, staff, and visitors. During an interview on 12/16/19 at 12:15 p.m., a dietary manager (#1) stated, "I have started the process of getting my CDM [certified dietary manager]." Upon request, on 12/18/19, the facility failed to provide evidence of staff member (#1) completing the required education of CDM, certified food service manager, or a national certification for food service management and safety from a national certifying body. The facility failed to provide the necessary training in food and nutrition services to carry out daily operation duties.	F 801	We have hired an interim Certified Dietary Manager. She will begin employment on 1/2/2020. We have placed employment advertisements to hire a Certified Dietary Manager of Licensed Registered Dietitian. The position is to be filled ASAP. I have attached licensure documentation of current CDR.	
F 803 SS=E	Menus Meet Resident Nds/Prep in Adv/Followed CFR(s): 483.60(c)(1)-(7) §483.60(c) Menus and nutritional adequacy. Menus must- §483.60(c)(1) Meet the nutritional needs of	F 803		1/30/20

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F 803	Continued From page 3 residents in accordance with established national guidelines.; §483.60(c)(2) Be prepared in advance; §483.60(c)(3) Be followed; §483.60(c)(4) Reflect, based on a facility's reasonable efforts, the religious, cultural and ethnic needs of the resident population, as well as input received from residents and resident groups; §483.60(c)(5) Be updated periodically; §483.60(c)(6) Be reviewed by the facility's dietitian or other clinically qualified nutrition professional for nutritional adequacy; and §483.60(c)(7) Nothing in this paragraph should be construed to limit the resident's right to make personal dietary choices. This REQUIREMENT is not met as evidenced by: Based on observation, facility policy review, review of diets and menus, and staff and resident group interview, the facility failed to serve food according to prepared menus during 2 of 2 meals observed (noon on 12/16/19 and evening on 12/17/19). Failure to serve food according to menus may result in inadequate nutrition and weight loss. Findings include: Review of the facility policy titled "Accuracy and Quality of Tray Line Service" occurred on 12/18/19. This undated policy stated, ". . . The	F 803	Staff shall receive training on therapeutic diets and menus, portion control, and correct utensils for use in serving, including those residents requesting small portions. Inservice training will be completed prior to January 22, 2020. Ongoing, all new staff shall receive training and this will be documented. Residents shall be interviewed for preferences for regular or small portions. Care plans and diet cards shall be updated by January 22, 2020.	

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F 803	Continued From page 4 menu extensions display food items and amounts for each regular or therapeutic diet. . . . Each meal will be checked for: . . . Proper portion sizes . . ." Review of the facility policy titled "Portion Control" occurred on 12/18/19. This undated policy stated, ". . . Individuals will receive the appropriate portions of food as outlined on the menu. . . ." During the resident group interview on 12/17/19 at 4:30 p.m., the residents agreed the portion sizes at the evening meal were "getting smaller." Observation on 12/16/19 at 11:46 a.m. showed dietary staff served a casserole using a 1/3 cup scoop and served green beans using a 1/4 cup spoodle to Residents #1, #4, #5, #7, #9, #12, #15, #20, #21, #22, and #27. Review of the menu identified correct portion sizes as 1/2 cup for the casserole and 1/2 cup for the green beans. Review of diet orders for Residents #1, #4, #5, #7, #9, #12, #15, #20, #21, #22, and #27 identified regular portions. Observation on 12/17/19 at 5:25 p.m. showed dietary staff served beef stew using a six ounce (oz) ladle to Residents #2, #4, #6, #19, #27, #82, #182, and #183. Review of the menu identified the correct portion size as eight oz. for the beef stew. Review of diet orders for Residents #2, #4, #6, #19, #27, #82, #182, and #183 identified regular portions. During an interview on the morning of 12/18/19, a	F 803	Certified Dietary Manager and/or Licensed Registered Dietitian shall conduct and document weekly monitoring for the next quarter, and monthly thereafter to assure correct portion sizes pursuant to the menu, therapeutic diet and resident preferences for small portions are served.	

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F 803	Continued From page 5 dietary supervisor (#1) identified all residents receive small portions except two (neither of the residents listed above).	F 803		
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: THIS IS A REPEAT DEFICIENCY FROM THE SURVEY COMPLETED ON 12/06/2018 Based on observation, review of the Food and Drug Administration (FDA) Food Code 2013, facility policy, and staff interview, the facility failed to store, prepare, and serve food under sanitary conditions in 1 of 1 kitchen (Main kitchen). Failure to ensure proper sanitation of kitchen equipment, dishes and utensils may result in	F 812	ICE MACHINE/WALK-IN REFRIGERATOR: A daily, weekly, and monthly cleaning schedule, including the ice machine and walk-in refrigerator will be implemented by January 22,2020. Clarification as to duties of the specific departments whose duty to complete cleaning shall be delineated. Staff will be trained on cleaning and	1/30/20

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F 812	Continued From page 6 foodborne illness to residents, staff, and visitors. Findings include: ICE MACHINE Review of facility policy titled "Production, Storage and Dispensing of Ice" occurred on 12/18/19. This undated policy, stated, "The ice dispenser will be cleaned and sanitized at least monthly, and/or as needed. Inside and outside of machine and the area around the machine will be cleaned. . . . " - The main tour of the kitchen occurred on 12/16/19 at 12:15 p.m., with a dietary manager (#1). Observation of the ice machine showed dust debris and liquid spill on the outside of the ice machine. During an interview, the dietary manager (#1) stated she was unsure whose responsibility it was to clean the ice machine. During an interview on 12/16/19 at 12:20 p.m., the maintenance staff (#4) confirmed cleaning the ice machine wasn't his responsibility. During an interview on 12/16/19 at 12:25 p.m., the dietary manager (#1) stated she started at the facility in July 2019 and failed to clean the ice machine to date. WALK-IN REFRIGERATOR Review of facility policy titled "Cleaning Instructions: Refrigerators" occurred on 12/18/19. This undated policy, stated, "The refrigerators will be cleaned thoroughly inside and outside with a detergent and followed by a sanitizer at least	F 812	documentation of cleaning in the dietary department by January 22, 2020. Ongoing, all new staff shall receive training and this will be documented. Certified Dietary Manager and/or Licensed Registered Dietitian shall conduct and document weekly monitoring to assure equipment is clean and schedule is being followed. The walk-in freezer door and surrounding area is to be cleaned of all frost by 1/8/2020. This will enable the door to be closed completely to better seal. Area will be monitored daily for frost build-up and if this returns/continues, Red River Refrigeration (company who installed door) will be consulted for further direction on solving this problem. DISHWASHER/DISHWASHINGS STAFF/QUATERNRY SANITIZER: Staff shall receive training on policy and procedures, monitoring, and documentation of dishwashing and quaternary sanitizing, including infection control protocol while cleaning equipment and surfaces, washing dishes, proper temperature of sanitizing rinse cycle, and procedures when proper temperature and quaternary sanitizing solution concentration is not achieved by January 30, 2020. Ongoing, all new staff shall receive training and this will be documented. Staff shall monitor an document the temperature of the sanitizing rinse cycle	

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F 812	Continued From page 7 once every month, or as needed. Spills and leaks will be cleaned as they occur. . . ." - Observation on 12/16/19 at 12:40 p.m. showed red liquid with debris in it, on the floor under the shelving where staff thaws meat. Observation further showed a thick frost along the entire edge of the entry wall/door of the walk-in freezer. The facility failed to provide documentation of cleaning the walk-in refrigerator when asked. DISHWASHER The FDA Food Code 2013, page 135, stated ". . . (A) Except as specified in ¶ [paragraph] (B) of this section, in a mechanical operation, the temperature of the fresh hot water SANITIZING rinse as it enters the manifold may not be more than 90 degrees Celsius [C] (194 Fahrenheit [F]), or less than . . . 82 degrees C (180 degrees F)." Pages 145-146, stated, ". . . Sanitization of equipment and utensils . . . Hot water mechanical operations . . . achieving utensil surface temperature of 71 degrees C (160 degrees F) as measured by an irreversible registering temperature indicator. . . ." - Observation on 12/16/19 at 1:10 p.m., showed a dishwasher currently in use in the main kitchen. A hotplate thermometer, placed in the dishwasher, showed a maximum temperature of 173 degrees F after three consecutive cycles. Review of the November 2019 dishwasher temperature record showed the kitchen staff failed to record temperatures 5 out of the 30 days, and 3 of the 25 temperatures recorded	F 812	with the hotplate thermometer at each meal. This was implemented on December 18, 2019. The machine has met required 1 60 degrees three times daily. Certified Dietary Manager and/or Licensed Registered Dietitian shall conduct and document weekly monitoring to assure policy and procedures for dishwashing, cleaning equipment and surfaces are followed. FOOD STORAGE Staff shall receive training on policy and procedures for storage of scoops outside of food container by January 22, 2020. Ongoing, all new staff shall receive training and this will be documented. Certified Dietary Manager and/or Licensed Registered Dietitian shall conduct and document weekly for one month and then quarterly thereafter, monitoring to assure proper storage of scoops.	

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were below 180 degrees F on the manifold gauge thermometer.

During an interview on 12/18/19 at 1:17 p.m., the dietary manager (#1), stated she was unaware corrective action was necessary if the reading was less than 160 degrees F at plate level.

The facility failed to ensure staff monitor/record dishwasher temperatures in the main kitchen and failed to ensure staff be knowledgeable in safe dishwasher rinse temperatures. Failure to maintain utensil surface temperatures at 160 F may result in inadequate sanitization and/or foodborne illness.

DISHWASHING STAFF

Review of facility policy titled "Cleaning Dishes/Dish Machine" occurred on 12/18/19. This undated policy, stated, "Staff will follow these procedures for washing dishes. . . . The person loading dirty dishes will not handle the clean dishes unless they change into a clean apron and wash hands thoroughly before moving from dirty to clean dishes. . . .put dishes away if clean (be sure clean hands or gloves are used)."

- Observation on 12/16/19 at 12:45 p.m., showed two dietary staff (#2 and #3) clear dirty dishes from the dining room, load them into the dish machine, and put the clean ones away. Staff failed to wear aprons or perform hand hygiene when moving between dirty and clean dishes.

Staff failed to follow proper infection control protocol while washing dishes. Failure to follow infection control protocol may result in cross

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contamination and/or spread of infection.

QUATERNARY SANITIZER

- The Diversey J-512 Sanitizer (a quaternary [quat] sanitizer) directions for use identified the concentration should be 200-400 parts per million (ppm) for effective sanitization.

Review of the facility's sanitizer log for November 5, 2019 - December 5, 2019 identified staff recorded sanitizer concentrations on 13 of the 42 days. The concentrations recorded by staff ranged from 66-800 ppm. During an interview on 12/16/19 12:50 p.m., a dietary supervisor (#1) stated the quat should measure 800 ppm, and staff should test the solution daily. The dietary supervisor filled a bucket with fresh quat solution and used test strips with a range of 0-1000 ppm to test the solution. The quat failed to produce a color change. Use of quat testing strips with a range of 0-500 ppm identified the quat concentration to be 150 ppm.

On 12/16/19 at 5:17 p.m., the dietary supervisor (#1) filled a bucket with fresh quat solution and tested the solution using the facility's test strips. The solution failed to produce a color change. Use of testing strips with a 0-500 ppm range identified the concentration of the quat to be 200 ppm.

During an interview on the morning of 12/18/19, the dietary supervisor (#1) identified the facility did not have a policy related to the use of/testing of quat solution.

FOOD STORAGE

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F 812	Continued From page 10 Review of the policy titled "Food Storage" occurred on 12/18/19. This undated policy stated, ". . . Scoops must be provided for bulk foods . . . Scoops are not to be stored in food or ice containers . . . - Observation of the evening meal on 12/17/19 showed a container of Thick & Easy (a thickening agent used for liquids) with the scoop stored inside.	F 812		