RI Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALR01460	A. BUILDING: _____ B. WING _____	C 03/01/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EVERGREEN ASSISTED LIVING	116 GREENE STREET WOONSOCKET, RI 02895

(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
S 003	Initial Comments An unannounced complaint/incident investigation survey was conducted at this residence. Deficiencies were identified.	S 003		
S 490	Residential Care Services 2.4.21.C Dietetic Services 2.4.21 (C) Dietetic Services C. The food service in each residence shall comply with the appropriate requirements of R.I. Gen. Laws Chapters 21-27 and 21-31, Rhode Island Food Code (Part 50-10-1 of this Title), and such other applicable statutory or regulatory provisions. This Requirement is not met as evidenced by: Based on record review and staff interview, it has been determined that the residence has continued non-compliance with ensuring that all food services be conducted in accordance with the appropriate requirements of the Rhode Island Food Code. Findings are as follows: According to Section 4-703.11 of the Rhode Island Food Code which states in part, "...Hot Water and Chemical...After being cleaned, equipment, food-contact surfaces and utensils shall be sanitized in: (C) Chemical manual or mechanical operations, including the application of sanitizing chemicals by immersion, using a solution as specified in the Food Code 4-501.114...(C) a quaternary ammonium solution [a type of chemical that is used to kill bacteria, viruses, and mold, that are often found in	S 490	S490 Correction (1) Going forward 3/1/24 no resident is allowed in kitchen or allowed to wash dishes.	

RECEIVED
APR 08 2024
FACILITIES REGULATION

4/8/24

Facilities Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: administrator — (X6) DATE: 4/4/24

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S 490	Continued From page 1 disinfectants and cleaning products] shall have a concentration as indicated by the manufacturer's used direction..." A community reported allegation of poor quality of care and staffing concerns was received by the Rhode Island Department of Health on 2/15/2024; the allegation states in part, "...a few residents stated they are doing chores such as...cleaning the dining room after meals and doing dishes..." During an interview on 3/1/2024 at approximately 11:09 AM with the Charge Nurse, she indicated that some residents do participate in chores, including washing of dishes. Additionally, she acknowledged that Resident ID #1 does assist with washing the dishes that are being used by the residents. The residence's documentation failed to provide evidence residents are educated on the process of sanitizing dishes or that there was a system for ensuring all dishes were sanitized correctly before being utilized by the residents. During an interview on 3/1/2024 at approximately 12:58 PM with the Administrator, she acknowledged that residents are doing chores, including washing dishes that are being used by the residents. She further acknowledged that Resident ID #2 did assist with washing the dishes prior to his/her discharge in December.	S 490	S510 Correction 4/8/24 [redacted] Will be back and here M-F and [redacted] works Sat + Sun So there will be someone here who is food safety certified Administrator effective 4/8/24 4/8/24 CMT/FSD	
S 510	Residential Care Services 2.4.21.G(1-4) Dietetic Services 2.4.21 (G) (1-4) Dietetic Services G. All food services shall be conducted in	S 510		

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S 510	Continued From page 2 accordance with the rules and regulations pertaining to Certification of Managers in Food Safety (Part 50-10-2 of this Title) that include but are not limited to the following provisions: 1. Each residence where potentially hazardous foods are prepared shall employ at least one (1) full-time, on-site manager certified in food safety who is at least eighteen (18) years of age. 2. Residences that primarily serve the elderly and individuals with diminished immune systems shall have a manager certified in food safety present during preparation of all hot potentially hazardous foods. 3. Residences that have a licensed capacity of twenty-six (26) or more residents and that employ ten (10) or more full-time equivalent employees directly involved in food preparation shall employ at least two (2) full time, on-site managers certified in food safety. 4. Residences that have a licensed capacity of twenty-five (25) or fewer residents and that employ five (5) or fewer full-time equivalent employees involved in preparation and serving of food, shall only be required to employ one (1) full time manager certified in food safety. This Requirement is not met as evidenced by: Based on record review and staff interview, it has been determined that the residence has continued non-compliance with ensuring that all food services be conducted in accordance with the rules and regulations pertaining to certification of managers in food safety.	S 510		

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S 510	Continued From page 3 Findings are as follows: A community reported allegation of poor quality of care and staffing concerns was received by the Rhode Island Department of Health on 2/15/2024; the allegation states in part, "...a routine access visit at this facility and during my visit, there was no dietary person...There was a CNA [Certified Nursing Assistant] who was making lunch for the residents..." Record review of the list of current employees provided by the residence revealed Staff A was hired on 4/9/2015 as a Nursing Assistant/Certified Medication Technician. During surveyor observations of the kitchen on 3/1/2024 at approximately 10:46 AM and at 11:30 AM, Staff A was observed cooking and preparing mushroom soup and seafood salad sandwiches for the residents. During a surveyor interview immediately following the observation at 11:35 AM with Staff A, she acknowledged that she prepared the above-mentioned meal for the residents. She further acknowledged that she is not certified in food safety and that there was not a certified manager in food safety in the building. Additionally, Staff A indicated that she prepares the residents' lunch and supper every Friday, Saturday, and Sunday. During a surveyor interview on 3/1/2024 at approximately 12:58 PM with the Administrator, she acknowledged that a certified food safety manager was not in the residence when hot food was being prepared for the residents.	S 510		

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S 605	Continued From page 4	S 605		
S 605	Physical Plant 2.4.27.A.1.e General Provisions 2.4.27 (A) (1) (e) Fire Code And Structural Requirements e. Facilities must have an annual inspection to assess compliance with the Fire Safety Code. The inspection shall be conducted under the authority of the State Fire Marshal. (1) Documentation of the State Fire Marshal inspection required under § 2.4.27(A)(1)(e) of this Part must be submitted with the application for renewal of licensure. The documentation must reflect compliance with the Fire Safety Code or be in accordance with § 2.4.27 (A)(1)(a) of this Part. This Requirement is not met as evidenced by: Based on record review it has been determined the residence failed to have an annual State Fire Marshal inspection which indicates compliance with the Fire Safety Code. Findings are as follows: Record review failed to reveal an inspection report demonstrating compliance with the State Fire Marshal requirements. Record review of a State Fire Marshal Inspection report reveals the residence was identified as being out of compliance on 03/16/2018 due to a kitchen suppression system. Record review fails to reveal evidence there was a Fire Safety Code inspection indicating	S 605	S605 CCA has applied for a grant to be able to fix the Kitchen Suppression System. The State fire marshal will be here 3/21/24 (am) 4/8/24	3/1/24 3/1/24

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S 605	Continued From page 5 compliance after that date.	S 605	I will send you a copy of the report once received.	3/18/24

S605 AMS 4/8/24