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	WY0005	A. BUILDING: _____ B. WING _____	07/15/2021

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S 000	OPENING COMMENTS Rules and Regulations utilized for this survey are: Rules and Regulations for Program Administration of Nursing Care Facilities, Chapter 11, effective 07/01/2020 Rules and Regulations for Licensure of Nursing Care Facilities, Chapter 19, effective 06/26/2000 A licensure survey was conducted by Healthcare Licensing and Surveys from 7/12/21 to 7/15/21.	S 000		
S2957	Ch 11 Sec 11 (a)(i) Dietetic Services (a) The facility shall provide dietetic services that meet the nutritional needs of residents according to the science of nutrition. The dietetic service shall operate with safe food handling practices from receipt through services in accordance with the most current edition of the FOOD CODE from the U.S. Department of Health and Human Services, Public Health Service, Food and Drug Administration. (i) Dietary Supervision. Overall supervisory responsibility for the dietetic service shall be assigned to a full-time qualified dietetic supervisor. (A) If the qualified supervisor is not a Registered Dietitian, she/he shall be a graduate of a dietetic technician program approved by the American Dietetic Association or a dietary managers' educational program approved by the Certifying Board for Dietary Managers. Training and experience in food service supervision and nutrition equivalent in content to the approved educational programs are acceptable. (B) Visits of the consultant dietitian shall	S2957		8/20/21

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S2957	Continued From page 1	S2957		

be scheduled to assure that the professional dietetic service needs of the facility are met. These visits shall be:

(I) For at least eight (8) hours every other week, so that adequate time is allowed for observation of more than one (1) meal per visit; or,

(II) For at least four (4) hours every week so that adequate time is allowed to observe the preparation and serving of food at meal time. The weekly visits shall be scheduled to allow for observation of different meals.

(C) Reports of the consultant dietitian shall be made verbally and in writing to the Administrator or his/her designee. The reports shall be kept on file with notations made of actions taken by the facility. The report shall include dates, length of time on-site, functions performed and recommendations.

(D) The consultant or staff dietitian shall develop written plans and conduct or supervise inservice programs for dietary personnel on a monthly basis.

(E) The consultant or staff dietitian shall participate in the development of policies and procedures, as well as the development or approval of all menus.

(F) The consultant dietitian is to provide assistance and advice, as needed, regarding the dietary department budget.

(G) The consultant or staff dietitian shall maintain interdisciplinary communication and act

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S2957	Continued From page 2 as the dietetic service's chief liaison to the medical and nursing staffs. (H) The dietetic supervisor shall be responsible for department orientation, training, scheduling, and work assignments for all dietetic service personnel. (I) The dietetic supervisor shall be responsible for menu planning, ordering or recommending the purchase of supplies, monitoring the department budget, controlling costs, maintaining associated records, etc. (J) The dietetic supervisor shall be responsible for the development of policies and procedures. These polices shall be maintained in a manual and reviewed at least annually. Reviews and revisions shall be dated and signed by the supervisor and the consultant or staff dietitian. (K) If the dietetic supervisor also has responsibility for cooking, adequate time shall be allowed for supervisory management. This State Rule and Regulation is not met as evidenced by: Based on staff interview the facility failed to ensure the dietary manager met qualifications, and further, the facility failed to ensure the registered dietitian met the minimum number of hours for visits to the facility to provide needed observations, tringing, and recommendations. The census was 95. The findings were: 1. Interview with the dietary manager on 7/12/21	S2957	Preparation or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because the provisions of federal and state law require it. The plan of correction serves as the facility□s	

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S2957	Continued From page 3 at 9 AM confirmed he was new to the position, and had worked there about 2 weeks. The manager stated he had worked as a private chef and did not have a dietary manager or food service manager certification or a culinary degree. The manager stated he was hired with the understanding that a certification would be required. Interview with the the administrator on 7/12/21 at 11:32 AM confirmed the manager was new and needed to be enrolled in a certification program. 2. Interview with the registered dietitian (RD) on 7/13/21 at 3:08 PM revealed she visited the facility 1 day every 3 weeks. She was not aware of the minimum hours requirements for visits, and further stated she did not provide any written report to the administration regarding her recommendations. She further stated there was not a formal process in place to identify residents who required nutritional assessments based on the Minimum Data Set (MDS) assessments. The following concerns were identified: a. Review of the medical record for resident #84 showed the resident had a significant weight loss identified on the 6/21/21 significant change MDS assessment. The record failed to show a nutritional assessment was completed by the RD related to the significant change. b. Observations of the kitchen on 7/12/21 at 9 AM and 7/14/21 at 9:51 AM revealed there were sanitation issues related to cleanliness/sanitation and food storage. c. Observations on 7/14/21 at 12:55 PM showed there were concerns identified with the palatability of the resident meals. The test tray showed the food was not at an appetizing temperature when served. The meals were not served on plates, they were served in disposable paper clamshell style containers. The main item	S2957	allegation of compliance. S 2957 RD Visits CORRECTIVE ACTION A Certified Dietary Manager is now in place to mentor the current Dietary Manager 25 hours per week until the current dietary manager is able to take the certification course. The Registered Dietician will provide oversight for an additional 10 hours per week. RD makes in-house visits at a minimum of 8 hours every other week or 4 hours every week. The Dietician reports her recommendations to the administration. A Nutrition Data Collection was completed by RD for resident #84 on 7/23/21. The range top and both convection ovens were cleaned on 7/28/21. The hood vents above the range were cleaned on 7/28/21. The microwave oven was cleaned on 7/28/21. The raw meat was moved to the bottom shelf on 7/12/21. The dust was cleaned on the condenser fan cover and surrounding area in the walk-in refrigerator and the chicken was covered on 7/12/21.	

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S2957	Continued From page 4 was chicken and dumplings, the taste was somewhat salty but acceptable. The temperature was not acceptable. It was cool, and measured 129.4 degrees Fahrenheit (F). The vegetable was herbed green beans, which were not at all warm when tasted. They measured 105.6 degrees F.	S2957	The wiping towels were replaced on 8/3/21. Plugs for the 3-compartment sink were purchased and put into use on 7/14/21. The refrigerated unit near the service area was cleaned inside and out on 8/3/21. The vent on the wall near the dry storage room and the vent inside the dry storage room were cleaned on 8/6/21 The walls behind the food preparation area were cleaned on 7/28/21. The facility has ordered and has put into use electric Cambro Carts to assist with keeping the room trays warm during meal service. The number of room trays have significantly been reduced as many residents have returned to the dining room. Education was provided to the Dietary staff by the Dietary Manager/designee prior to 8/20/21 regarding the use of the proper equipment to keep the room tray meals warm and accuracy for plating food to the information provided on the meal ticket. IDENTIFICATION OF OTHERS All residents have the potential to be affected by qualified dietary staff. All residents have the potential to be	

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S2957	Continued From page 5	S2957	affected by the number of hours provided by the Dietician. An Assessment History Report was run to identify all Significant Change MDS since 5/13/21. All residents identified have had an assessment completed by RD. All residents who are served room trays have the potential to be affected by this practice related to palatability. SYSTEMIC CHANGES A Certified Dietary Manager is in place for a total of 35 hours per week. The Registered Dietician makes in house visits at a minimum of 8 hours every other week or 4 hours every week. Hours for in-house visits are documented and provided to the Administrator weekly. An Assessment History Report will be run weekly by RD to identify any Significant Changes. The Dietician provides reports weekly to the administration Education was provided to the Registered Dietician by prior to 8/20/21 regarding the requirements of timely assessments by the DON/designee hours required and providing reports to the administration. Education was provided to the dietary staff by the dietary manager/designee prior to 8/20/21 regarding cleaning the kitchen, cross contamination, infection control, temperatures, food borne illnesses, and the use of cleaning logs. The dietary manager/designee inspects the kitchen for sanitation, cross	

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S2957	Continued From page 6	S2957	contamination, infection risk, temperatures, risk of food borne illness and use of cleaning logs randomly 4 times per week. The facility has purchased and put into use 4 electric Cambro Carts to assist in keeping food warm that is being transported to residents for room trays. Education was provided to the nursing staff by the SDC prior to 8/20/21 regarding need to pass room trays as soon as they are received from the kitchen to ensure that the food maintains the correct temperature. The Dietary Manager or designee places a test tray on each cart 3 times per week. The temperature of this test tray is taken after all the other meal trays have been passed to ensure that all meals are holding the correct temperatures at the time of service. The temperatures are recorded by the Dietary Manager and tracked. Education was provided to the Dietary staff by the Dietary Manager/designee prior to 8/20/21 regarding the use of the proper equipment to keep the room tray meals warm and accuracy for plating food to the information provided on the meal ticket. The Dietary Manager/designee monitors the tray line 3 times per week and observes the accuracy of the meal plated to the information on the meal ticket.	

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S2957	Continued From page 7	S2957	MONITORING The dietary manager reports any changes related to certification to the Quality Assurance Performance Improvement committee as they arise for their review and direction. The Registered Dietician monitors the required visitation hours, monitoring of weight loss and reporting regarding recommendations monthly and reports any identified patterns or trends to the Quality Assurance Performance Improvement Committee monthly or their review and resolution. This tracking will continue for 3 months unless the Quality Assurance Performance Improvement Committee deems it prudent to continue. The Dietary Manager monitors the random inspections of the kitchen for sanitation, cross contamination, infection risk, temperatures, risk of food borne illness and use of cleaning logs to identify patterns or trends related to food the findings to the Quality Assurance Performance Improvement Committee monthly or their review and resolution. This tracking will continue for 3 months unless the Quality Assurance Performance Improvement Committee deems it prudent to continue. The Dietary Manager monitors the temperatures for the test trays on the room tray carts and accuracy of meal to identified patterns or trends related to food temperatures and reports his findings to the Quality Assurance Performance	

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S2957	Continued From page 8	S2957	Improvement Committee monthly or their review and resolution. This tracking will continue for 3 months unless the Quality Assurance Performance Improvement Committee deems it prudent to continue.	