Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALF007	A. BUILDING: _____ B. WING _____	C 05/05/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
POINTE FRONTIER RETIREMENT COMMUNITY	1406 PRAIRIE AVENUE CHEYENNE, WY 82009

(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 000	OPENING COMMENTS Rules and Regulations utilized for this survey are: Rules and Regulations for Program Administration of Assisted Living Facilities, Chapter 12, effective 08/24/2020. Rules and Regulations for Licensure of Assisted Living Facilities, Chapter 4, effective 06/28/2001. A complaint survey was conducted by Healthcare Licensing and Surveys on 5/6/22. The survey was prompted by complaint intake LIC-22-017.	S 000		
S5026	Ch 12 Sec 7 (j)(ii) Assisted Living Facility (ALF) Core Services (j) (ii) There must be an organized dietetic service that meets the daily nutritional needs of residents and ensures that food is stored, prepared, distributed, and served in a manner that is safe, wholesome and sanitary in accordance with the rules. The dietetic service must ensure that food prepared in nutritionally adequate in accordance with the Dietary Reference Intakes (DRI) for adults. This State Rule and Regulation is not met as evidenced by: Based on observation, staff interview, and policy and procedure review, the facility failed to ensure food was stored, prepared, and served in a safe and sanitary manner. The census was 41. The findings were: 1. Observation on 5/5/22 at 10:32 AM showed the door to the pantry storage was open, and contained a cooling rack with two sheet pans of cake and brownies open to air. The back door of	S5026		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Molly Stillman — TITLE: Executive Director — (X6) DATE: 6/30/20

~~6/30/22~~ - 9/14/22 - POC accepted. ED notified. J. VanDyke
DOC is 6/30/22.

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S5026	Continued From page 1 the kitchen was propped open with a sponge, with the wind blowing dirt and debris into the kitchen and pantry. 2. Observation on 5/5/22 at 10:16 AM showed a refrigerated buffet table containing individual containers of sour cream, salsa, cottage cheese, vegetable juice, salad, fruit bowls, and applesauce. Continued observation showed the thermometer displayed the current temperature of the table as 48 degrees Fahrenheit. 3. Observation on 5/5/22 at 10:40 AM showed a rolling cart containing bags of celery. It was noted the expiration date on the bag was 4/29/22, and the bag contained pieces that were dried with brown ends, and also contained pieces that had a wet, brown substance on them. At 10:54 AM, observation showed the dining room supervisor preparing individual servings of other vegetables from the cart. Upon completion, she placed a bag of lettuce back onto the cart, moving the bag expired celery to make room. The dining services director then took the cart carrying the spoiled celery and placed it in the walk-in refrigerator. 4. Observation on 5/5/22 at 11:04 showed the lunch meal being served, with 6 hot food items on the steam table. No observations were made of the food being checked for temperature or a temperature being recorded prior to the foods being served. Further observation showed the thermometer on the refrigerated buffet table read 46 degrees Fahrenheit. 5. Observation on 5/5/22 at 11:58 AM showed a large refrigerator in the food prep area. The thermometer on the outside of the unit was broken, and did not display temperature calibrations. Continued observation showed a	S5026		

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S5026	Continued From page 2 thermometer inside the unit; however, the thermometer was sideways, and contained bubbles in the mercury. No accurate temperature was displayed, and this refrigerator unit did not have a temperature log for documentation. Observation on 5/5/22 at 10:48 AM showed the temperature log for a chest freezer containing ice cream only contained one logged temperature; it was also noted the temperature log was dated "June 2021." Observation on 5/5/22 at 11:22 AM showed an upright freezer in the kitchen; this freezer did not have a temperature log for documentation. 6. Observation on 5/5/22 at 10:27 AM showed the dining room supervisor individually prepared containers of salad dressing. She was not wearing a hair net. Observation on 5/5/22 at 10:40 AM showed dining room server #1 in the food preparation area individually wrapping dinner rolls in plastic wrap. She was not wearing a hair net. Continued observation showed personal belongings on the food prep table, including a cell phone and partially consumed toast and juice. Observation on 5/5/22 at 11:00 AM showed dining room server #2 helping the dining room supervisor serve brownies. Neither staff member was wearing a hair net. 7. Interview with the administrator and dining services director on 5/5/22 at 1:02 PM revealed the expectation for staff in a food prep and/or serving area was to be wearing a hair net or head covering while serving and handling food items, and no personal items should be in those areas. It was further confirmed that both hot and cold food items need to be checked for temperature and the temperature documented prior to service. The dining services director confirmed the chest freezer had not been documented on since June	S5026		

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S5026	Continued From page 3 of 2021, and there were two units missing temperature logs. He also confirmed the broken and inaccurate thermometers on and in the refrigerator in the food prep area. He also stated the backdoor was propped open for ease of re-entry after trash disposal and deliveries, but confirmed it could cause contamination to the uncovered food items. 8. Review of the facility policy "Refrigeration Temperature," last reviewed 11/17/10, showed " ... Health regulations require cold food to be maintained below 41 degrees [Fahrenheit] in refrigerators and below zero degrees in freezers ... To ensure product safety, a log must be maintained for each unit ..." 9. According to Food Code 2017, U.S. Public Health Service: 3-501.17 "(A) Except when PACKAGING FOOD using a REDUCED OXYGEN PACKAGING method as specified under § 3-502.12, and except as specified in (D) and (E) of this section, refrigerated, READY-TO-EAT, POTENTIALLY HAZARDOUS FOOD (TIME/TEMPERATURE CONTROL FOR SAFETY FOOD) prepared and held in a FOOD ESTABLISHMENT for more than 24 hours shall be clearly marked to indicate the date or day by which the FOOD shall be consumed on the PREMISES, sold, or discarded when held at a temperature of 5°C (41°F) or less for a maximum of 7 days." 10. According to Food Code 2017, U.S. Public Health Service: 3-501.16 "(A) Except during preparation, cooking, or cooling, or when time is used as the public health control as specified under §3-501.19, and except as specified under (B) and in (C) of this section, TIME/TEMPERATURE CONTROL FOR SAFETY	S5026		

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S5026	Continued From page 4 FOOD shall be maintained: (1) At 57°C (135°F) or above, except that roasts cooked to a temperature and for a time specified in 3-401.11(B) or reheated as specified in 3-403.11(E) may be held at a temperature of 54°C (130°F) or above; or (2) At 5°C (41°F) or less. 11. According to Food Code 2017, U.S. Public Health Service 4-204.112: "(B) Except as specified in (C) of this section, cold or hot holding EQUIPMENT used for TIME/TEMPERATURE CONTROL FOR SAFETY FOOD shall be designed to include and shall be equipped with at least one integral or permanently affixed TEMPERATURE MEASURING DEVICE that is located to allow easy viewing of the device's temperature display." 12. According to Food Code 2017, U.S. Public Health Service: 3-305.14 Food Preparation. During preparation, unpackaged FOOD shall be protected from environmental sources of contamination.	S5026		
S5027	Ch 12 Sec 7 (j)(iii) Assisted Living Facility (ALF) Core Services (j) (iii) Food service supervision: (A) Day to day responsibilities for food production and management of the dietary services shall be assigned to a person with nutrition and food service management experience equivalent to that of a Certified Dietary Manager. Based on employee file review and staff interview, the facility failed to ensure the food service management qualifications were met. The	S5027		

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S5027	Continued From page 5 census was 41. The findings were: 1. Review of the dining service manager's employee file showed he had received his "ServSafe" certification on 4/30/19. However, no Certified Dietary Manager (CDM) credentials or documentation were noted. 2. Interview with the administrator and dining services director on 5/5/22 at 1:02 PM revealed the "ServSafe" certification was the only current credentialing he carried. The administrator stated since the facility did not accommodate special or modified diets, the facility did not carry a CDM or dietician on staff.	S5027		

Pointe Frontier Retirement Community

Identification Number: ALF007

Plan of Correction – Survey Date May 5, 2022

TAG# S5026

Responses to the cited deficiencies do not constitute an 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 solely as a matter of compliance with Federal and State Law.

A. There must be an organized dietetic service that meets the daily nutritional needs of residents and ensures that food is stored, prepared, distributed, and served in a manner that is safe, wholesome and sanitary in accordance with the rules. The dietetic service must ensure that food prepared in nutritionally adequate in accordance with Dietary Reference Intakes (DRI) for adults.

Date Completed: June 30, 2022

1. With Respect to the Specific requirement cited:

- In-Service training will be provided to all cooks, servers, and dining room supervisor. All new thermometers have been placed in refrigerators and freezers. New temperature logs have been posted on all refrigerators and freezers. Baking rack covers have been supplied to cover all open food on racks. Audits will be completed of the refrigerators to check for perishables daily by kitchen designee and weekly by Executive Director. Daily temperature logs have been posted for logging holding food temperatures.

2. With Respect to How the Facility will identify Potential Concerns and Take Corrective Action:

- Dining Service Director and Executive Director will provide and document In-Service Training addressing propping doors open, proper storage of food on cooling rack, proper storage of food on refrigerated buffet table, proper labeling of food, completing daily audits of perishables, proper documentation of holding temperatures, proper use of hairnets while preparing food, proper documentation of refrigerator and freezer temperature logs for all cooks, servers, and dining room supervisor.

3. With Respect to What Systemic Measures have been put in place to address Stated concern:

- Dining Services Director and Dining Room Supervisor will provide Executive Director their Performance Improvement Plan (PIP) with their 30-day plan to ensure proper procedures are sustained to prevent reoccurrence. The Performance Improvement Plan will be used in conjunction with the community Quality Management Performance Improvement (QMPI).

4. With Respect to How the Plan of Corrective Measures will be monitored:

- Dining Director will perform daily inspections of identified items in addition Executive Director will perform weekly random inspections to meet and sustain proper procedures are being met. Copies of these daily and weekly inspections will be part of our Quality Management Performance Improvement (QMPI) and files will be maintained by the Executive Director.

Pointe Frontier Retirement Community

Identification Number: ALF007

Plan of Correction – Survey Date May 5, 2022

TAG# S5027

Responses to the cited deficiencies do not constitute an 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 solely as a matter of compliance with Federal and State Law.

A. Day to day responsibilities for food production and management of the dietary services shall be assigned to a person with nutrition and food service management experience equivalent to that of a Certified Dietary Manager.

1. With Respect to the Specific requirement cited:

- Food and nutrition services program will be over seen by a registered dietician, in addition continuing education will be conducted with Dining Services Director.

Estimated date of compliance: 30 June 2022

2. With Respect to How the Facility will identify Potential Concerns and Take Corrective Action:

- Menu changes are documented and are going to be reviewed by Registered Dietitian.

3. With Respect to What Systemic Measures have been put in place to address Stated concern:

- Continuing education will be provided by registered dietician to dining services director.

4. With Respect to How the Plan of Corrective Measures will be monitored:

- Executive Director will audit routine education is being provided monthly to dining services director.