STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	045421	A. Building B. Wing	05/14/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Ashley Rehabilitation and Health Care Center	2600 N 22nd Street Rogers, AR 72756

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards. Based on observation, interview and facility document review, the facility failed to ensure that the food preparation equipment and environment were maintained in a clean and sanitary condition to prevent contamination and potential development of foodborne pathogens in one of one kitchen observed. The findings include: During an observation of the lunch meal preparation on 05/13/2026 at 10:45 AM, [NAME] #6 was observed pureeing rice. [NAME] #6 took the lid off the chicken base put it upside down on the preparation table, obtained the needed amount of chicken base in the container with a plastic spoon and mixed it in a container of water. [NAME] #6 then put the lid on the container of chicken base and placed the spoon on the lid of the closed container, which touched the un-sanitized preparation table. [NAME] #6 then took the dirty blender, used for pureeing the rice to the dishwasher, ran it through the dishwasher, carried the blender back to the preparation table, and started pureeing the tortillas without washing her hands, or wearing gloves. [NAME] #6 opened the lid of the same chicken broth used for the rice puree, used the same plastic spoon, that was on top of the dirty chicken base lid, and without washing the spoon obtained the needed amount of chicken base, and placed the spoon's contents in another pan of warm water to puree the tortillas. During preparation of mechanically chopped fajitas, [NAME] #6 took the lid off the blender, placed it bottom side down on the food prep table, used an ungloved hand to pull the blade out of the blender, and placed the blade on top of the blender. [NAME] #6 then sprayed a pan with non-stick spray using an ungloved hand and poured the food into the pan. Without performing hand hygiene, [NAME] #6 then used an ungloved hand to put the blade back into the blender before preparing another batch of mechanically chopped fajita meat. During an observation of the lunch meal service on 05/13/2026 at 12:10 PM, [NAME] # 6 was observed having not performed handwashing before the meal service began. [NAME] #6 then opened a package of six-inch tortillas with ungloved hands, plated rice and beans with a scoop, took a tortilla out of the package with ungloved hands, and placed the tortilla on the plate. Gloves were not worn while handling and placing food on each plate. During an observation of lunch service on 05/13/2026 at 12:10 PM [NAME] #6 was observed pushing her glasses up onto her face, on two separate occasions, then taking a scoop that had fallen into the food to the sink, washing it off and replacing the scoop into the food. [NAME] #6 then wiped her hands on her apron and used the same ungloved hand to handle tortillas during preparing the plates. No hand hygiene was performed during this observation. (continued on next page)

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	During an interview on 05/13/2026 at 12:25 PM, the Dietary Manager (DM) stated staff were expected to wash their hands between dirty and clean tasks. The DM indicated that the outside of the tortilla wrapping was not sanitary and staff should have washed their hands or used a utensil to obtain the tortillas. During an interview on 05/14/2026 8:20 with [NAME] #6 stated I wash my hands after I touch everything to prevent cross contamination. Review of a facility policy on glove usage, dated May 2015 revealed to ensure safe and proper food handling during food preparation and service, food items should not be handled with bare hands. Hand washing per guidelines should occur between each task, gloves should be worn if handling food is necessary. Hands should be washed after handling dirty dishes and when changing task. Review of a facility policy titled, Handwashing, dated May 2015 listed the following guidelines: Roll down paper towels Turn on water and run until it is warm. Lather hands with antiseptic soap Wash hands, giving particular attention to the areas between fingers, around cuticles and fingernails. Wash forearms Rinse thoroughly with warm water, beginning at the top of the forearm Wipe hands dry with clean paper towel Turn off water with paper towel and dispose of paper towel Review of an employee in-service dated 03/01/2026 titled, Dietary infection Control, indicated to wash hands with soap and water, before beginning work, after handling raw food, after touching waste or trash and after touching face. [NAME] #6's signature was present as having attended the in-service. Review of an employee in-service dated 01/21/2026 titled, Glove use in Food Service, indicated to use gloves when handling ready to eat foods which will not be cooked to a safe temperature such as hamburger buns. [NAME] #6's signature was present as having attended the in-service.

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0803 Level of Harm - Potential for minimal harm Residents Affected - Many	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident. Based on observations, interviews, facility policy, and record reviews, it was determined the facility did not consistently follow the supplied menu for 57 of 57 residents who received meals from the facility. The findings include: Review of the Spring/Summer 2026 menu revealed that on week one, day three, milk (1 cup) was to be served during breakfast, lunch, and dinner. During an observation of the lunch meal service on 05/13/2026 at 12:10 PM, it was observed that milk was not served to the residents. During an observation on 05/13/2026 at 23:30 PM, the refrigerator was observed to contain individual servings of milk. The refrigerator also contained seven gallons of 2% milk, four gallons of whole milk and four cases containing 25 individual chocolate milk cartons. Review of a detailed food order with a delivery date of Friday 05/08/2026 revealed the following milk was ordered for 57 residents to last until Monday 05/11/26. -2 cases which contained 25 containers of 8-ounce 1% chocolate milks. -2 cases which contained 25 containers of 8-ounce Homogenized fresh milks. -2 cases which contained 25 containers of 8-ounce 2% fresh milks. During an interview on 05/13/26 at 1:15 PM, the Dietary Manager [DM] reported that even though milk was on the menu, the facility only offered it twice a day. The DM reported she was not sure how much to order, so she just ordered milk but did not calculate the amount. During an interview on 05/14/2026 at 11:57 AM, the Administrator reported their expectations of the dietary staff were that staff were to follow the approved menu, and to order food supplies in advance and in an adequate supply to serve the facility residents what was listed on the menu. If the facility did not have milk available to serve to the residents, they expected the kitchen staff to notify the Administrator, then take the credit card and purchase milk for the residents. Review of a facility in-service titled, Menu Substitution Record, dated 01/21/2026, revealed a menu substitution record should be used when the facility was out of an item or used something else in place of the item that was out. An example of the menu substitution record was attached which included the date, scheduled food item, the reason for and what was substituted, and places for initials of the employee and registered dietician.