

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 065176	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/17/2024
NAME OF PROVIDER OR SUPPLIER Summit Rehabilitation and Care Community		STREET ADDRESS, CITY, STATE, ZIP CODE 500 Geneva St Aurora, CO 80010	

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)
<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>43135</p> <p>Based on observations, interviews and record review, the facility failed to store, prepare, distribute, and serve food in a sanitary manner in the main kitchen.</p> <p>Specifically, the facility failed to ensure:</p> <ul style="list-style-type: none"> -Hair restraints were worn by staff in the main kitchen while preparing, handling, cooking and serving food for the residents: and, -Ensure fluorescent ceiling lights above areas where food was prepared, cooked, and served were covered by light shades. <p>Findings include:</p> <p>I. Professional reference</p> <p>According to the Colorado Retail Food Establishment Rules and Regulations (2024) retrieved from https://drive.google.com/file/d/1kEtv4f6YciFXXzLEu6amUc9Anu9uWGYN/view on 4/18/24,</p> <p>Food employees shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively to keep their hair from contacting exposed food; clean equipment, utensils, and linens.</p> <p>Lights bulbs shall be shielded, coated, or otherwise shatter-resistant, in areas where there is exposed food; clean equipment, utensils, and linens.</p> <p>II. Facility policy and procedure</p> <p>The Food Wholesomeness: Procurement, Storage, Preparation and Service Sanitary Conditions policy, revised January 2024, was provided by the regional corporate consultant (RCC) #2 on 4/17/24 at 1:54 p.m. It read in pertinent part,</p> <p>Staff always wear proper clothing, and foot wear, uniforms, and hair restraints on.</p> <p>III. Hair nets</p> <p>(continued on next page)</p>

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
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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>A. Observations</p> <p>On 4/16/24 at 9:45 a.m. the dietary manager (DSM), dietary cook (DC) #1 and DC #3 were not wearing hair restraints in the kitchen while handling, preparing, or serving food.</p> <p>On 4/16/24 at 12:00 p.m. the nursing home administrator (NHA), the environmental service director (ESD), and RCC #1 were standing at the entry door to the kitchen. The NHA, ESD, and RCC #1 said they could not go into the kitchen because there were no hair nets available to wear.</p> <p>On 4/16/24 at 12:05 p.m. the DSM, DC #1, DC #2 and DC #4 were not wearing hair restraints as they prepared, cooked and served food for the residents.</p> <p>B. Staff interviews</p> <p>The DSM was interviewed on 4/16/24 at approximately 9:45 a.m. The DSM said he did not know where the box of hair nets was for staff to utilize when entering the kitchen. He said he ordered the hair nets but he could not remember when he placed the order. He said the box of hair nets might not have been delivered or was stolen.</p> <p>The DSM said he was not aware the kitchen staff did not have hair nets on when handling food or that the staff did not have hair restraints to use. He said he did not purchase additional hair restraints from the store when he realized the box he had ordered was missing. He said staff should know to wear hair nets when they were in the kitchen. He said he did not know if hair nets could be reworn since there were no new hair nets available to be used. He said he did not know how long it had been since the kitchen staff had hair restraints to use while preparing and cooking food.</p> <p>The DSM said he did not wear a hair restraint because his hair was short. He said he did not know he needed to wear a hair net when he was the cook. He said if staff did not properly wear hair restraints the resident's food could potentially become contaminated. He said he knew there was a regulation the staff were to wear hair restraints when they handled the food in the kitchen.</p> <p>RCC #1 was interviewed on 4/16/24 at 12:00 p.m. RCC #1 said she would go to the supply store and get hair nets immediately. She said the supply store was close to the facility. She said the DSM should have gone to get a box of hair restraints when the kitchen ran out of the supply. At 12:15 p.m. RCC #1 returned with a supply of hair restraints for the kitchen staff.</p> <p>DC#1 and DC #3 were interviewed together on 4/16/24 at 12:05 p.m. DC #1 and DC #3 said they knew they should be wearing hair restraints when they were in the kitchen handling, preparing and serving food. They said there were no hair nets available to wear so they did not wear one. They said they did not remember when there were hair nets available to wear in the kitchen.</p> <p>DC #4 was interviewed on 4/16/24 at 12:10 p.m. DC #4 said she did not have a hair restraint on because there were no hair nets available for her to use. She said she knew she should have worn a hair net while preparing food.</p> <p>DC #3 was interviewed again on 4/17/24 at 11:45 a.m. DC #3 said he had a hair net on today. He said the kitchen staff were provided education on wearing hair nets while in the kitchen on 4/16/24.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>IV. Kitchen lights</p> <p>A. Observations</p> <p>On 4/16/24 at approximately 9:40 a.m. three of four light fixtures which held fluorescent lights on the ceiling were observed in the main kitchen. Each light fixture held two long light bulbs (each bulb was four feet in length), which totaled six fluorescent lights. The three light fixtures above food preparation areas did not have protective light shades over them (see ESD interviews below).</p> <p>B. Staff interviews</p> <p>The DSM was interviewed on 4/16/24 at 9:45 a.m. The DSM said he did not know why there were no shades over the lights in the kitchen where the food was prepared, cooked and served. He said it was not his job to make sure there were covers over the lights. He said he could not remember if he told the ESD to order covers for the lights. He said if a light were to break, the glass could go in the resident's food as well as onto the dietary staff. He said light covers were for safety and should be installed in the kitchen.</p> <p>RCC #2 was interviewed on 4/17/24 at 9:30 a.m. RCC #2 said the light bulbs in the kitchen above the food stations were fluorescent bulbs. She said yesterday afternoon (4/16/24) the fluorescent bulbs were replaced with LED lights and shades for the lights were ordered.</p> <p>The ESD was interviewed on 4/17/24 at 2:30 p.m. He said yesterday he replaced the fluorescent light bulbs in the kitchen where the food was prepared with LED lights. He said he ordered more LED (light-emitting diode) lights as well as shades for the light fixtures. He said he knew certain types of light bulbs could break and then the resident's food would be contaminated. He said he knew it was a regulation to have shades on the lights but the lights were without shades.</p>

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>43135</p> <p>Based on observations, record review and interviews, the facility failed to ensure an effective program of pest management.</p> <p>Specifically, the facility failed to ensure hallway ceiling light fixtures on hallways 200 and 500, and Resident #4's room were free from bugs.</p> <p>Findings include:</p> <p>I. Professional reference</p> <p>According to the Center for Disease Control (CDC) Guidelines for Environmental Infection Control in Health-Care Facilities, updated July 2019, pp. 94-95, retrieved on 4/22/24 from https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf</p> <p>Insects can serve as agents for the mechanical transmission of microorganisms, or as active participants in the disease transmission process by serving as a vector (able to transmit infectious diseases). Arthropods recovered from health-care facilities have been shown to carry a wide variety of pathogenic microorganisms.</p> <p>From a public health and hygiene perspective, arthropod and vertebrate pests should be eradicated from all indoor environments, including health-care facilities. Modern approaches to institutional pest management usually focus on: eliminating food sources, indoor habitats, and other conditions that attract pests; excluding pests from the indoor environments and applying pesticides as needed.</p> <p>A pest-control specialist with appropriate credentials can provide a regular insect-control program that is tailored to the needs of the facility and uses approved chemicals and/or physical methods. Industrial hygienists can provide information on possible adverse reactions of patients and staff to pesticides and suggest alternative methods for pest control, as needed.</p> <p>II. Facility policy and procedure</p> <p>The Pest Control policy revised May 2008, was provided by the regional corporate consultant (RCC) #3 on 4/17/24 at 10:19 a.m. It revealed in pertinent part,</p> <p>Our facility shall maintain an effective pest control program.</p> <p>The facility maintains an on-going pest control program to ensure that the building is kept free of insects and rodents.</p> <p>Maintenance services assist, when appropriate and necessary, in providing pest control services.</p> <p>III. Observations</p> <p>On 4/16/24 at 9:45 a.m. the following was observed:</p> <p>(continued on next page)</p>

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>-On the 200 hallway, two of five hallway ceiling light fixtures had bugs visible inside the protective light covers (see interviews below).</p> <p>-On the 500 hallway, four of nine hallway ceiling light fixtures had bugs visible inside the protective light covers.</p> <p>On 4/16/24 at 1:00 p.m. on the 500 hallway, Resident #4's window ledge had approximately 20 dead bugs on it. The window track inside his closed window sill had approximately 20 alive and dead bugs.</p> <p>IV. Staff and resident interviews</p> <p>The environmental service director (ESD) was interviewed on 4/16/24 at 9:45 a.m. The ESD took off the covers over the light fixtures on the 200 hallway. He said the bugs were maybe flying ants and mosquitos but he was not sure exactly what type of bugs were in the light covers. He said it was difficult to count the exact amount of bugs but maybe there were 60-100 small bugs in the light fixture covers. He said he was never told there were bugs in the light fixtures. He said he had not noticed the bugs in the lights. He said bugs in the light fixtures were not his job to handle.</p> <p>The nursing home administrator (NHA) was interviewed on 4/16/24 at 9:50 a.m. The NHA said it was the job of the floor technician (FT) to keep the light fixtures cleaned.</p> <p>The FT was interviewed on 4/16/24 at 10:00 a.m. The FT said part of his job was to clean the ceiling light fixtures. He said he noticed bugs in the ceiling light covers on the 200 and 500 hallway. He said he told the assistant environmental service director (AESD) about the problem last Wednesday. (see AESD interview below)</p> <p>The NHA was interviewed again on 4/16/24 at 10:03 a.m. The NHA said the bug problem in Resident #4's room was brought to her attention in the morning meeting today on 4/16/24 around 9:15 a.m. She said she did not know why the ESD did not know about the bug problems on the 200 and 500 hallway. She said the ESD had worked in the position for about one year and he could not know everything there was to know about his job in that amount of time.</p> <p>The AESD was interviewed on 4/16/24 at 12:30 p.m over the phone. He said the FT had told him about the bugs in the light covers the week before. The AESD said he told the ESD about the problem with the bugs in the lights. He said a few weeks prior to telling the ESD about the bugs in the lights, a company came to the facility to spray for bugs. He said the environmental company met with him and the ESD. He said the company said they were going to order bug traps for the facility and that was the last he heard about the traps. He said he did not know what happened with the order for bug traps but no traps ever came in to handle the ongoing bug problem.</p> <p>Resident #3 was interviewed on 4/16/24 at 12:15 p.m. Resident #3 said she was the resident council president and she tried to speak for the residents in the facility as needed. She said she lived on the 500 hallway and there was an ongoing bug problem in the ceiling lights. She said she had told facility staff many times about the bugs but the problem was never fixed.</p> <p>(continued on next page)</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Certified nurse aide (CNA) #1 was interviewed on 4/16/24 at 12:50 p.m. She said she observed bugs in the ceiling lights on several occasions. She said Resident #4 had concerns about the bugs yesterday (4/15/24) in his care conference meeting. She said the bugs were on his window ledge today (4/16/24).</p> <p>Resident #4 was interviewed on 4/16/24 at 1:00 p.m. Resident #4 said his room had an ongoing bug problem. He said he told the staff about the bugs at his care conference yesterday (4/15/24). He said the social services staff said it would be addressed but it had not gotten any better. He said he thought the bugs on his window sill and ledge were flying ants. He said he kept a fly swatter by his bed in case any bugs landed on him. He said he told the assistant social worker (SSA) and two of his relatives who were at the care conference about the bugs. He said the SSA and his family members saw all of the bugs in his room during the care conference.</p> <p>Resident #4's family member was interviewed on 4/16/24 at 1:05 p.m. She said she was not at the care conference yesterday. She said she saw all of the bugs in his room today (4/16/24). She said she hoped the facility would fix the problem.</p> <p>RCC #1 was interviewed on 4/16/24 at 1:30 p.m. She said housekeeping went into Resident #4's room within the last half hour and cleaned his window area from the bugs but did not get them all. She said all of the bugs would be removed immediately.</p> <p>The social service director (SSD) and the NHA were interviewed together on 4/16/24 at 2:36 p.m. The SSD said the SSA did not tell her about the bug problem. She said this morning (4/16/24) she went through the papers (stacked on the SSA's desk) and found a grievance form about the bug problem in Resident #4's room. She said she brought the grievance form to the morning meeting today at approximately 9:15 a.m. She said she discussed it with the facility management team. She said she did not know why the bug problem for Resident #4 was not handled as soon as it was brought to the attention of the SSA. She said she did not know why the problem had not been resolved yet as it had been discussed in the morning meeting</p> <p>The NHA said nothing had been done to fix the bug problem yet because the problem was just brought to her attention today (4/16/24) around 9:30 a.m She said she did not know why the resident still had bugs in his room four hours after it was brought to the facility managements attention.</p> <p>The SSA was interviewed on 4/16/24 at 2:57 p.m. over the phone. She said she attended the care conference with Resident #4 on 4/15/24. She said the conference took place in Resident #4's room. She said two of his family members were in attendance. She said Resident #4 complained about the flying ants and he showed everyone the bugs. She said Resident #4 kept a fly swatter by his bed so that he could kill the bugs. She said she told the SSD about the situation shortly after the care conference on 4/16/24. She said the SSD told her to write down on a white piece of paper what had happened in the care conference and the bug problem would get handled the following morning on 4/16/24. She said she did her job to report the situation about the bugs before she went home on 4/15/24.</p> <p>RCC #1 was interviewed on 4/16/24 at 3:05 p.m. RCC #1 said she immediately implemented education to all facility staff that if they saw any bugs at any time it was to be reported to the NHA immediately. RCC #1 said she had a team of staff members immediately walk around the building both inside and outside to investigate the building for any pest control needs. She said she told the team of staff members to look for any areas where bugs could come in, holes or gaps in the walls or windows.</p> <p>(continued on next page)</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>The ESD was interviewed on 4/16/24 at 3:45 p.m. The ESD said he and the AESD had a meeting with a bug extermination company about a month ago. He said the company said they were going to order bug traps for the facility. He said the company did not order the bug traps for the facility. He said he did not know why the bug traps were not ordered. He said he did not follow up with the situation to investigate when the bug traps would arrive at the facility.</p> <p>The NHA was interviewed again on 4/17/24 at 1:44 p.m. The NHA said she requested the company that owned the facility to provide her with a new bug extermination company that she could rely on. She said the company who owned the facility agreed to her request and that by tomorrow (4/18/24) they would hire a new company for her. She said the bug problem would get resolved immediately.</p>