STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	115325	A. Building B. Wing	03/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Pruitthealth - Washington	112 Hospital Drive Washington, GA 30673

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 observations, staff interviews, and review of the facility's policy titled, Labeling, Dating, and Storage, the facility failed to ensure opened food items in the walk-in refrigerator, stand-alone freezer, and dry storage area were labeled, dated, and discarded by expiration date. In addition, the facility failed to ensure sanitary condition in the kitchen. The deficient practices had the potential to affect 44 out of the 45 residents who were on an oral diet.Findings Include:Review of facility's policy titled Labeling, Dating, and Storage revised date 11/11/2022 revealed in Procedures section, 1. Food and beverage items will have an identifying label as well as received date and opened date, as applicable; for items prepared onsite, a use by date will also be indicated.During the initial tour on 02/27/2025 at 06:35 AM with [NAME] DD, the inspection of food in the dry storage area revealed multiple opened and unlabeled packages: one 10-lb (pound) enriched macaroni product, one 10-lb plain breadcrumbs, one 5-lb white cake mix, one 5-lb brownie mix, one 11.3-ounce turkey gravy mix, one 11.3-ounce chicken gravy mix, one 13.29-ounce brown gravy, and one 16-ounce baking soda. The walk-in cooler/refrigerator was inspected and revealed 17- 8 fluid oz (ounce) cartons of chocolate milk, which had an expiration date of 02/25/2026. [NAME] DD verified the count and expiration date. The stand-alone freezer was inspected and revealed two packs of 12 sausages, each containing 40 oz sausages, with an expiration date of 12/05/2025. Furthermore, one clear trash like bag, containing 50 garlic sticks, along with a one-gallon bag marked as chicken, were observed to lack the necessary labeling or dating.Observation on 02/28/2026 at 10:17 AM with the Dietary Manager (DM) during the follow-up tour revealed four air vents located next to the drying area for clean dishes and the food preparation station that contained a black-like substance, rust accumulation, and dust. Additionally, black-like debris was found beneath the dishwasher. Observations made beside the steamtable during serving showed one vent and ceiling with black-like dust. This was confirmed with the DM and Maintenance Director.An interview on 02/28/2026 at 10:26 AM with the Maintenance Director confirmed that the kitchen had not been cleaned this month, which was typically done at the start of each month. The Maintenance Director explained that the vents in the kitchen, particularly those near the cooking and cleaning areas, showed signs of grease accumulation and dust on top. The Maintenance Director shared that he did not maintain a log or have a fixed schedule for cleaning the vents and confirmed that it had been over a year since they were last cleaned. The Maintenance Director also indicated that this situation posed a risk of food contamination.An interview conducted on 02/28/2026 at 10:31 AM with the DM disclosed that she was made aware of all unlabeled and undated items observed with [NAME] DD. She indicated that she would begin searching inside open boxes for used items placed by the staff and would carry out any in-service training. DM affirmed that it was everyone's responsibility to check, particularly if they handled or opened the item. The DM also mentioned that she had not previously noticed the condition of the vents as she did not typically look upwards, but she woukld make an effort to do so more frequently. The DM confirmed the vents looked rusted and black.

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