STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	115681	A. Building B. Wing	11/18/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Pruitthealth - Old Capitol	310 Highway #1 Bypass Louisville, GA 30434

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 policies titled Labeling, Dating, and Storage, the facility failed to ensure that food was properly labeled and stored. This deficient practice had the potential to place the 88 residents receiving nutrition and hydration from the kitchen at increased risk of foodborne illness.Findings include: Review of the facility policy titled Labeling, Dating, and Storage, dated 11/11/2022, revealed the Policy Statement stated, It is the policy of [Company Name] for all partners who assist in handling, preparing, serving, and storing food and beverage items to follow the proper procedures for labeling, dating, and storage to ensure proper food safety. The Procedure section stated 1. Food and beverage items will have an identifying label as well as a received date and opened date, as applicable: for items prepared onsite, a 'use by' date will also be indicated. 2. Foods will be stored in their original or approved container and, if opened, shall be wrapped tightly with film, foil, etc. 3. Bulk food dispensing utensils (scoops) shall be stored: a. In a clean, protected location, if the scoops are used only with a food that is not a time/temperature controlled for safety food. 4. Food and beverage items will be discarded according to guidance from a government agency such as the USDA [United States Department of Agriculture] and FDA [Food and Drug Administration]; an example of approved guidance is attached to this policy. Observations during a tour of the kitchen, on 9/19/2025 from 8:15 am through 9:30 am, with the Dietary Manager (DM) revealed:Observation of the walk-in freezer: One bag of diced pepper, opened and undated. One bag of waffles, opened and undated. Observation of the walk-in cooler revealed One half of a block of butter, unlabeled and undated. Two bags of shredded cheese, opened and unlabeled. One bag of cooked chicken fajita in a small, tall plastic container with a discard date of 9/13/2025.Observation of a large floor bin containing dry rice revealed that the lid was not secured, exposing the rice to the environment. The Dietary Manager closed the lid and stated that the rice was exposed to the environment and that she would discard the rice.In an interview on 9/19/2025 at 9:45 am, the DM reported that her expectations were for the staff to monitor for food labeling per each shift and discard expired food items. She stated that the dietary staff had received training on food labeling and dating, and she planned to re-educate them.

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