

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145135	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/02/2025
NAME OF PROVIDER OR SUPPLIER Richland Nursing & Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE 900 East Scott Street Olney, IL 62450	

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 0550</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49714</p> <p>Based on observation, interview, and record review, the facility failed to respond to residents' requests for assistance in a timely manner to ensure dignity and respect for quality of life for 3 (R3, R6 and R7) of 7 residents reviewed for dignity. This failure resulted in care not being provided timely, causing R3, R6 and R7 to experience discomfort/pain, and caused R3 to feel humiliation and anxiousness from sitting in urine and/or feces for extended periods of time, not knowing how long it will take for her to receive necessary assistance.</p> <p>Findings Include:</p> <p>1. R3's Resident Face Sheet with a print date of 12/27/2024, documented R3 was admitted to the facility on [DATE], with diagnoses that included acute respiratory failure with hypoxia, chronic obstructive pulmonary disease, heart failure, secondary pulmonary arterial hypertension, major depressive disorder, type 2 diabetes mellitus, and anxiety disorder.</p> <p>R3's Physician Order Summary with date range from 11/27/2024 - 12/27/2024 documented an order to apply zinc cream to gluteal fold and buttocks twice daily and as needed with incontinence.</p> <p>R3's Minimum Data Set (MDS) dated [DATE], documented a Brief Interview for Mental Status (BIMS) score of 15, indicating R3 is cognitively intact. Section GG of R3's MDS documented R3 is a mechanical lift for transfers, and Section M Skin Conditions documented R3 was at risk for developing pressure ulcers/injuries with treatments documented as application of ointments/medications.</p> <p>R3's current Care Plan documented a Focus Area of Dependent transfers. May use stand up lift. Date Initiated 11/20/2024. This focus area included the following interventions: Descend from chair/bed with instruction for proper hand placement.</p> <p>R3's Resident Progress Note dated 12/23/2024 authored by V15 (Family Nurse Practitioner/FNP) .she is sitting up in wheelchair eating lunch. States she can tolerate sitting up for about an hour or two hours and then needs to go back to bed. States that over the weekend she sat up way to long and her bottom hurt a lot.</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 0550</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<p>On 12/26/2024 at 12:45 PM, R3's call light was noted to be lit above the door and the audible alert could be heard going off at the nurse's station. This surveyor was on R3's hall continuously from 12:45 PM to 1:43PM and completing intermittent observations of the call light being illuminated and heard during this time. This surveyor entered R3's room at 1:43 PM and verified with R3 that no staff had come to answer her call light. At 1:46 PM, V11 (Certified Nursing Assistant/CNA) entered R3's room and shut the call light off. V12 (CNA) also arrived and assisted V11 with putting R3 back to bed.</p> <p>On 12/26/2024 at 1:43 PM, R3 stated every day she has issues getting her call light answered. R3 stated that it is not a lack of the staff wanting to answer it, there just isn't enough staff to do the job. R3 verified that she turned her call light on at 12:45 PM because she wanted assistance to be put back in bed. R3 stated that it is not unusual to wait up to an hour and a half to get someone to answer her call light. R3 stated that when she has to wait long periods of time it causes her to have pain in her coccyx area that continually gets worse. R3 stated that on a weekend she waited 4 hours for a staff member to answer her call light. R3 stated that on the weekend they have less staff than during the week. R3 stated that when therapy comes in on the weekend to do her exercises, she will not get out of bed because she never knows when she will get to go back to bed. R3 stated she tells the staff when they pick up her lunch tray that she wants to go back to bed as soon as they have time. R3 said she generally waits a few minutes then turns on her call light. R3 stated that the CNA's are treated terribly and that is why the facility has trouble getting them. R3 stated that the transportation aide came in to take her vitals today and she had to ask her who she was because she has never seen her before. R3 stated that when she has to wait long periods of time, she is often incontinent of bowel and bladder. R3 stated that when she is incontinent and has to sit in it, it is humiliating. R3 stated that the areas on her coccyx burn and sting when she has to sit in urine and feces.</p> <p>2. R6's Resident Face Sheet, with a print date of 12/27/2024, documented R6 was admitted to the facility on [DATE], with diagnoses that included neurocognitive disorder with Lewy bodies, peripheral vascular disease, chronic kidney disease, unspecified atrial fibrillation, essential hypertension, spinal stenosis, and unsteadiness on feet.</p> <p>R6's MDS dated [DATE] documented a BIMS of 10, indicating R6 has moderate cognitive impairment. The same MDS documented R6 required substantial/maximal assistance for transfers and that R6 was at risk for developing pressure ulcers with treatments documented as applications of ointments/medications and application of dressing to feet.</p> <p>R6's Physician Order Report with a date reference of 11/27/2024-12/27/2024 documented an order for zinc barrier cream to buttocks twice daily, betadine to tops of toes and to right and left heel daily, and calcium alginate to bilateral heels daily.</p> <p>R6's current Care Plan documented a focus area of Resident has a potential for diminished range of motion, date initiated 07/25/2024. This focus area includes the following interventions: .observe for signs and symptoms of discomfort and report to nurse.</p> <p>(continued on next page)</p>		

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<p>F 0550</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<p>On 12/27/2024 at 8:58 AM, R6 stated that he has to wait to receive care a lot of days. R6 stated that he has waited over an hour for his call light to be answered. R6 stated he requires two staff to provide care for him. R6 stated that the facility needs more staff, especially on the weekends. R6 stated he has a catheter, but he does need assistance for other toileting needs. R6 stated he cannot reposition himself and has wounds. R6 stated when he waits for an hour for his call light to be answered so he can be repositioned, it causes him pain.</p> <p>3. R7's Resident Face Sheet with a print date of 12/27/2024, documented R7 was admitted to the facility on [DATE], with diagnoses that include chronic respiratory failure, hyperlipidemia, essential hypertension, retention of urine, and constipation.</p> <p>R7's MDS dated [DATE], documented a BIMS of 15, indicating R7 is cognitively intact. The same MDS documented R7 is at risk for developing pressure ulcers/injures with treatments documented as applications of ointments/medications.</p> <p>R7's Physician Order Report with a reference date of 11/27/2024 - 12/27/2024, documented an order for clean open area to scrotum, apply pink polymem foam, cover change daily and as needed.</p> <p>R7's electronic medical record in the section under Wound Management documented R7 has shearing to right buttock.</p> <p>On 12/27/2024 at 9:00 AM, R7 stated the care in the facility lacks due to not enough staff. R7 stated there is trouble getting call lights answered. R7 stated there are times he waits up to an hour for his light to be answered. R7 stated he looks at his cell phone when he turns the light on, so he knows how long it takes for them to respond. R7 stated that it is all shifts and weekends are typically worse. R7 stated the facility does not have enough staff to care for the residents. R7 stated he has sores on his coccyx and waits over an hour for the staff to put cream on him. R7 stated that the pain in his coccyx gets worse when he has to wait long periods of time.</p> <p>On 12/26/2024 at 1:50 PM, V11 (CNA) stated there are only 2 CNA's on this side (East/Center) of the building today. V11 stated she is exhausted trying to care for this many residents with just one other CNA. V11 stated that it takes 45 minutes to complete checking on residents on one hall and the other residents who need help often have to wait longer than what they should. V11 stated that the Transportation Aide/CNA was supposed to help today but she only did some vitals and answered a few call lights.</p> <p>On 12/26/2024 at 1:57 PM, V1 (Administrator) and V2 (DON/Director of Nurses) stated that there were two call-in's today. V2 stated the Transportation Aide was helping on the floor for a little bit until she had to leave to take an appointment, leaving two CNA's to cover all the residents on East/Center, which is 34.</p> <p>On 12/27/2024 at 9:05 AM, V14 (RN/Registered Nurse) stated staffing is a problem in the facility. V14 stated there are some mornings there is one CNA and one PA (Personal Assistant) to start the day off. V14 stated that residents have to wait for care to be provided because the PA cannot provide any care. V14 stated the CNA schedule is posted with not enough staff and she will ask the department heads to come in and help. V14 stated that there are times none of them will come in to help. V14 stated this is an ongoing issue with the facility but it is worse currently. V14 stated the nurses nor the CNA's can provide the care that the residents need.</p> <p>(continued on next page)</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49714</p> <p>Based on interview, observation and record review, the facility failed to ensure sufficient staff were scheduled/available to provide timely care to meet residents' needs. This failure has the potential to affect all 85 residents currently residing at the facility.</p> <p>Findings Include:</p> <p>1. R3's Resident Face Sheet with a print date of 12/27/2024, documented R3 was admitted to the facility on [DATE], with diagnoses that included acute respiratory failure with hypoxia, chronic obstructive pulmonary disease, heart failure, secondary pulmonary arterial hypertension, major depressive disorder, type 2 diabetes mellitus, and anxiety disorder.</p> <p>R3's Physician Order Summary with date range from 11/27/2024 - 12/27/2024 documented an order to apply zinc cream to gluteal fold and buttocks twice daily and as needed with incontinence.</p> <p>R3's Minimum Data Set (MDS) dated [DATE], documented a Brief Interview for Mental Status (BIMS) score of 15, indicating R3 is cognitively intact. Section GG of R3's MDS documented R3 is a mechanical lift for transfers, and Section M Skin Conditions documented R3 was at risk for developing pressure ulcers/injuries with treatments documented as application of ointments/medications.</p> <p>R3's current Care Plan documented a Focus Area of Dependent transfers. May use stand up lift. Date Initiated 11/20/2024. This focus area included the following interventions: Descend from chair/bed with instruction for proper hand placement.</p> <p>R3's Resident Progress Note dated 12/23/2024 authored by V15 (Family Nurse Practitioner/FNP) .she is sitting up in wheelchair eating lunch. States she can tolerate sitting up for about an hour or two hours and then needs to go back to bed. States that over the weekend she sat up way to long and her bottom hurt a lot.</p> <p>On 12/26/2024 at 12:45 PM, R3's call light was noted to be lit above the door and the audible alert could be heard going off at the nurse's station. This surveyor was on R3's hall continuously from 12:45 PM to 1:43 PM and completing intermittent observations of the call light being illuminated and heard during this time. This surveyor entered R3's room at 1:43 PM and verified with R3 that no staff had come to answer her call light. At 1:46 PM, V11 (Certified Nursing Assistant/CNA) entered R3's room and shut the call light off. V12 (CNA) also arrived and assisted V11 with putting R3 back to bed.</p> <p>(continued on next page)</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>R7's MDS dated [DATE], documented a BIMS of 15, indicating R7 is cognitively intact. The same MDS documented R7 is at risk for developing pressure ulcers/injures with treatments documented as applications of ointments/medications.</p> <p>R7's Physician Order Report with a reference date of 11/27/2024 - 12/27/2024, documented an order for clean open area to scrotum, apply pink polymem foam, cover change daily and as needed.</p> <p>R7's electronic medical record in the section under Wound Management documented R7 has shearing to right buttock.</p> <p>On 12/27/2024 at 9:00 A.M. R7 stated the care in the facility lacks due to not enough staff. R7 stated there is trouble getting call lights answered. R7 stated there are times he waits up to an hour for his light to be answered. R7 stated he looks at his cell phone when he turns the light on, so he knows how long it takes for them to respond. R7 stated that it is all shifts and weekends are typically worse. R7 stated the facility does not have enough staff to care for the residents. R7 stated he has sores on his coccyx and waits over an hour for the staff to put cream on him. R7 stated that the pain in his coccyx gets worse when he has to wait long periods of time.</p> <p>On 12/26/24 at 8:45 AM, this surveyor entered the facility on East/Center unit where Long Term Care Skilled Nursing Facility (SNF) residents are housed. At approximately 9:00 AM, during initial tour of the facility, this surveyor noted the (dementia and behavioral health) unit to be in its own separate building with one unit housing the Dementia Care Unit and one unit housing residents with behavioral challenges.</p> <p>On 12/26/2024 at 1:21 PM, V1 (Temporary Administrator & Social Service Director/SSD) stated that they have adequate staffing. On (dementia and behavioral health) they have 2 nurses and 4 CNA's, on East/Center, they have 1 nurse and 3-4 CNA's. V1 stated that (dementia and behavioral health) has 53 residents and East/Center has 34 residents.</p> <p>On 12/26/2024 at 1:30 PM, V2 (Director of Nursing/DON) stated the facility needs more staff. V2 stated they have had staff leave to go to other facilities and they are not getting any applications. V2 stated that on (dementia and behavioral health) unit they would ideally staff 3-4 CNA's and 2 nurses and on East/Center they staff 3-4 CNA's and one nurse. V2 stated that the Transportation Aide (who is also a CNA) helps at times on the floor.</p> <p>On 12/26/2024 at 1:50 PM, V11 (CNA) stated there are only 2 CNA's on this side (East/Center) of the building today. V11 stated she is exhausted trying to care for this many residents with just one other CNA. V11 stated that it takes 45 minutes to complete checking on residents on one hall and the other residents who need help often have to wait longer than what they should. V11 stated that the Transportation Aide/CNA was supposed to help today but she only did some vitals and answered a few call lights.</p> <p>On 12/26/2024 at 1:53 PM, V12 (CNA) stated there were two call-in's today and if V11 hadn't agreed to work, she has no idea how today would have gone. V12 stated that staffing has been an ongoing problem that is getting worse. V12 stated that she was told by V13 (Assistant Director of Nursing/Registered Nurse) there are not enough CNA's to make the January schedule.</p> <p>(continued on next page)</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>On 12/26/2024 at 1:57 PM, V1 (Administrator) and V2 (DON) stated that there were two call-in's today. V2 stated they got V11 to cover one of the call-ins and the Transportation Aide was helping on the floor for a little bit until she had to leave to take an appointment, leaving two CNA's to cover all the residents on East/Center, which is 34.</p> <p>On 12/26/2024 at 1:59 PM, V7 (Registered Nurse/RN) stated that transport aide helped for a little bit by answering some call lights and completing vital signs. V7 stated that staffing is a big issue in the facility.</p> <p>On 12/26/2024 at 2:43 PM, V13 (Assistant DON/RN) stated she is the nurse responsible for making the CNA schedule. V13 stated that she tried to have 6 CNA's on day shift and 5 CNA's on night shift. V13 stated that she is not allowed to staff more than 7 CNA's on day shift per her Corporate/Regional team. V13 stated that she is struggling with the January 2025 schedule because of two day shift CNA's quitting and one day shift CNA moving to night shift. V13 stated that the facility has been having a big issue with call-in's as well. V13 stated there were 3 CNA's that called in today. V13 stated that she was working on the floor, and no one told her until after 9 AM that there were call-ins. V13 stated that occasionally they will pull the transport aide to help cover call-ins when the appointment schedule allows. V13 stated that she reached out to the regional director last week about the staffing issue that the facility was facing with call-ins and the January 2025 schedule. V13 stated that she was told by the regional director that she was not allowed to use agency CNA's to help cover where the schedule is short. V13 stated the schedule has been really bad on weekends. V13 stated that there are times there are only 4 CNA's total for all the residents on the weekends. V13 stated that it is hard to pull from (dementia and behavioral health) side because they only have 3 to start with as well.</p> <p>The facility's December CNA Schedule documented there were 6 day shift CNA's scheduled on 12/26/24. The facility's Daily Assignment Sheet dated 12/26/2024 also documented 6 CNA's were scheduled to work day shift. Neither the schedule nor the daily assignment sheet reflected that there were two call-ins on 12/26/2024.</p> <p>On 12/27/2024 at 8:30 AM, V1 stated there was one CNA call in for the day.</p> <p>The December CNA Schedule and the Daily Assignment Sheet for 12/27/2024 documented that there are 6 CNA's scheduled and no documentation of any call-ins.</p> <p>On 12/27/2024 at 9:05 AM, V14 (RN) stated staffing is a problem in the facility. V14 stated there are some mornings there is one CNA and one PA (Personal Assistant) to start the day off. V14 stated that residents have to wait for care to be provided because the PA cannot provide any care. V14 stated the CNA schedule is posted with not enough staff and she will ask the department heads to come in and help. V14 stated that there are times none of them will come in to help. V14 stated this is an ongoing issue with the facility but it is worse currently. V14 stated the nurses nor the CNA's can provide the care that the residents need.</p> <p>(continued on next page)</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>On 12/27/2024 at 2:05 PM, V2 stated that the schedule and the daily assignment sheets do not match with how much staff is in the building. V2 stated that if there was a call in it is marked on the schedule and occasionally will get marked on the daily staffing sheet. V2 stated that on 12/26/24 and 12/27/24 they had several call-ins and those are not reflected on the daily assignment sheet. V2 stated the schedule has not been updated either to reflect the accurate number of staff that were working. V2 stated they try to cover call-ins and are sometimes not successful. V2 stated that V1 and V2 try to help answer call lights and provide care to the residents.</p> <p>On 12/27/2024 at 2:23 PM, V2 stated that neither the schedule nor the daily assignment sheet gets updated to reflect the actual staff that are working. V2 stated sometimes the documents get updated when there is a call-in and sometimes no one updates it.</p> <p>On 12/31/2024 at 10:45 AM, V2 stated the schedule for Saturday 12/28/24 did not change. V2 stated there were only two CNA's scheduled to cover East/Center which has 34 residents. V2 stated the nurse helped the aides as much as she could but there was only one nurse for East/Center.</p> <p>The facility policy titled Staffing with a revision date of November 2021, documented The facility provides adequate staffing to meet needed care and services for our resident population. The policy further documents, 1. Our facility maintains adequate staffing on each shift to ensure that our resident's needs and services are met and schedules adequate staff to meet or exceed individual state requirements.</p> <p>The facility Resident Matrix, with no date on it, documented 87 residents currently reside at the facility with 2 of those being in the hospital.</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145135	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/02/2025
NAME OF PROVIDER OR SUPPLIER Richland Nursing & Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE 900 East Scott Street Olney, IL 62450	
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(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 - Many</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>49714</p> <p>Based on observation, interview, and record review the facility failed to maintain the kitchen in a clean, sanitary and pest free condition. This has the potential to affect all 85 residents living in the facility.</p> <p>Findings Include:</p> <p>During a tour of the kitchen on 12/26/2024 at 9:07 AM, the following items were observed:</p> <ol style="list-style-type: none"> 1. There were no paper towels at the handwashing sink in the kitchen. 2. The storeroom was noted to have jelly packets on the floor and pieces of cereal on the floor under the shelving. 3. There were specs of food particles all over the floor along with dust, dirt and debris. 4. There was a paper bait trap noted in between two shelving units that had dead bugs on it, along with dead bugs noted behind the oven. Some of the dead bugs were noted to be roaches. 5. Two bones were noted on the floor directly under a metal table in the center of the room. 6. Dirt and debris was noted under the sink and shelving units in the kitchen. There was also a towel under the sink where the drain was leaking that was brown and speckled. <p>During a follow-up tour of the kitchen on 12/27/2024 at 8:42 AM, the following was observed:</p> <ol style="list-style-type: none"> 1. Food crumbs were noted to be in the bottom of the steam table. 2. Water standing on the floor under the sink 3. Pieces of cereal were still on the floor in the storeroom next to the bait trap. 4. Jelly packets and pepper packets were on the floor in the storeroom. 5. Noticeable food crumbs on the floor throughout the entire kitchen. <p>On 12/27/24 at 8:42 AM, V5 (Dietary Manager) stated the food crumbs do not come off the floor. The flakes on the floor were easily moved with the end of this surveyor's ink pen.</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 - Many</p>	<p>On 12/26/2024 at 8:50 AM, V1 (Temporary Administrator-Social Service Director/SSD) stated they have had roaches in the kitchen for a while. The (pest control) company had been coming to spray routinely for it. It was brought to V1's attention a few weeks ago that there were bugs in the kitchen. V1 stated that she contacted (Name of Pest Control Company) to come back and do a different treatment plan for the kitchen. V1 stated that V8 (Pest Control Employee) is coming once a week to do the treatment on the kitchen. V1 stated V8 was here on 12/13/24 and completed a treatment plan. V1 stated that V8 did not come back until 12/23/24 as he was waiting on the chemicals to come in that he had ordered to treat the kitchen.</p> <p>On 12/26/2024 at 9:16 AM, V5 (Dietary Manager) stated that the morning staff and the evening staff are responsible for cleaning the kitchen. V5 stated that the kitchen was cleaned on 12/25/2024 before the evening staff went home. V5 stated she did not know there were bugs and debris on the floor, and she was not aware of the bones on the floor.</p> <p>On 12/27/2024 at 2:10 PM, V1 stated it was her expectation for the kitchen to be clean. V1 stated that V5 has a cleaning schedule, and she expects for the staff who work in the dietary department to follow it.</p> <p>On 12/31/2024 at 9:37 AM, V5 (Dietary Manager) stated there was a staff member who recently cleaned the kitchen floors. V5 stated they were waxed, and she hopes the floors will continue to look as good as they do. When questioned about a cleaning schedule, V5 stated she threw away the old cleaning schedule once she made a new one. V5 stated that it was her expectation for the kitchen to be cleaned continuously and per the new cleaning schedule that she made.</p> <p>On 12/31/2024 at 9:51 AM, V17 (Pest Control Employee) stated the facility has an issue with roaches. V17 stated that cleanliness at the facility is an issue. V17 stated he has had conversations with the facility about the cleanliness in the kitchen being an issue. V17 stated he told the facility the bugs will not go to the bait when there are food particles all over the floor and counters.</p> <p>The facility Cleaning Schedule Policy dated February 2012 documents the following: There will be a written, comprehensive cleaning schedule posted and monitored to maintain the cleanliness and sanitation of the food service department.</p> <p>PROCEDURE:</p> <ol style="list-style-type: none"> 1. The food service manager is responsible for developing a cleaning schedule for the department. He/she will also monitor compliance and overall cleanliness and sanitation of the department. 2. The cleaning schedule will include: <ol style="list-style-type: none"> a. Each piece of equipment b. Specific position assigned to complete the task c. Frequency of cleaning; i.e. after each use, daily, weekly d. The method and agents to be used for cleaning will be written for each task. <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 - Many</p>	<p>3. A cleaning schedule will be posted and employees will initial and date tasks when completed.</p> <p>The facility Cleaning and Sanitation - General policy dated January 2012 documented The kitchen will be maintained in a clean and sanitary condition.6. Food that falls on the floor will be discarded 8. Work surfaces will be kept neat and clean during food p preparation and service.</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49714</p> <p>Based on interview, observation, and record review, the facility failed to maintain an effective pest control program to rid the facility of roaches and bed bugs. This failure has the potential to affect all 85 residents currently residing in the facility.</p> <p>Findings Include:</p> <p>1. On 12/26/2024 at 8:58 AM, V1 (Temporary Administrator/Social Service Director/SSD) stated they recently had a resident admitted with bed bugs. V1 stated that R1 was admitted from the hospital on 12/05/2024. V1 stated that R1's family brought in clothes on 12/07/2024 and staff found bed bugs in the clothes. V1 stated that R1 lives in an apartment in town, and she notified the housing authority of the bed bugs that were on R1's clothes. V1 stated that R2 was R1's roommate and R2 was moved to a different room. R1 was admitted to the hospital for other issues on 12/14/24. V1 initially stated that (Name of Pest Control company) came in and treated R1 and R2's room on 12/16/2024. V1 stated the rooms were heat treated and she continued to do the tape test in the rooms of R1 and R2, in the living room and the furniture at the nurse station and has not had any bed bugs. V1 explained the tape test consisted of her using tape at the edges of the furniture where seams were to see if there were bed bugs in the crevasses.</p> <p>On 12/26/2025 at 9:30 AM, V7 (Registered Nurse/RN) stated the bugs were found on 12/07/2024 when the family brought R1's clothes into the facility. V7 initially stated that when the bugs were found, R2 was moved to a different room and R1 had been sent to the hospital for a reason not related to bed bugs. V7 stated that the bed bug was found within 5 minutes of the family bringing in R1's clothes. V7 stated there were not any other bugs found since that day.</p> <p>On 12/26/2024 at 10:28 AM, during a follow-up interview, V1 stated that on 12/07/24 when they found the first bug, they knew it came into the facility in a bag of clothes that the family brought in that day. V1 stated that the staff saw it immediately and brought it to her. V1 stated after the first bug was found, that is when she started doing the tape tests. V1 stated that she wanted to make sure that it was an isolated incident. V1 stated that on 12/15/24, the staff found another bug in the room of R1 and R2. V1 stated at that time R2 was moved to a different room. V1 stated she returned to work on 12/16/24 and that is when (Name of Pest Control Company) was called and came in to do a treatment of the rooms (R1 and R2's shared room and R2's new room). V1 stated the rooms were treated on 12/19/2024.</p> <p>On 12/26/2024 at 10:44 AM, V2 (Director of Nursing/DON) stated the second bug was found on 12/15/24 on V10 (Certified Nursing Assistant/CNA). V2 stated at that time, R2 was moved to a new room and R1 had been sent to the hospital for other medical issues. V2 stated that the family of R1 had continued to visit and bring items in for R1 between 12/7 and 12/14. V2 stated that R1 and R2's belongings were bagged and cleaned. V2 stated that V1 had been checking in between the first and second bug being found to see if they had been in any other places. V2 stated she has not seen any.</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 - Many</p>	<p>On 12/26/2024 at 11:11 AM, V10 (CNA) stated that she was working night shift on 12/15/2024. At approximately 10:00 PM, V10 stated she had just walked into the dining room and saw a bed bug on her clothes. V10 stated the only room she had been in recently was R1 and R2's room. V10 stated she notified the nurse on duty and sent a picture of the bug to the CNA group chat that has the DON (V2) in it. V10 stated that V2 told her to put the bed bug in a bag and leave it for V1. V10 stated that she is working here on Christmas break since she is home from college and is not aware of any other issues with bed bugs. V10 stated she heard rumors about the facility not wanting to treat the room but is unsure if those rumors are true or not. V10 stated she has heard staff talking about how they are getting bed bug bites on their ankle, but she has never been bit and she has not heard of any residents being bitten by bed bugs.</p> <p>On 12/26/2024 at 11:40 AM, V1 stated she could not find the policy on 12/07/24 when the first bug was found. V1 stated that they did not implement the policy because she could not find it on the server.</p> <p>Company policy Bed Bugs Infestation with a revision date of March 2017 documented .2. Collect specimens and submit to pest management professionals qualified to identify them. 3. Call Pest Control Manager to perform an on-sight inspection. 4. Secure the residents room to prevent other residents from entering and post a DO NOT ENTER.</p> <p>2. On 12/26/2024 at 9:07 AM in the facility kitchen, the storeroom was noted to have jelly packets on the floor and pieces of cereal on the floor under the shelving. There were also specs of food particles all over the floor. Two bones were noted on the floor directly under a metal table in the center of the room. A paper bait trap was noted in between two shelving units that had dead bugs on it, along with dead bugs noted behind the oven. Some of the dead bugs were noted to be roaches.</p> <p>On 12/27/2024 at 8:42 AM, food crumbs were noted to be in the bottom of the steam table, cereal was still noted on the floor in the storeroom next to the bait trap, jelly and pepper packets were on the floor in the storeroom and there were noticeable food crumbs on the floor throughout the kitchen. Water was standing on the floor under the sink.</p> <p>On 12/26/2024 at 8:50 AM, V1 (Temporary Administrator/SSD-Social Services Director) stated they have had roaches in the kitchen for a while. The (pest control) company had been coming to spray routinely for it. It was brought to V1's attention a few weeks ago that the bugs in the kitchen were worse. V1 stated that she contacted pest control to come back and do a different treatment plan for the kitchen. V1 stated that V8 (Pest Control employee) is coming once a week to do the treatment on the kitchen. V1 stated V8 was here on 12/13/2024 and completed a treatment plan. V1 stated that V8 did not come back until 12/23/2024 as he was waiting on the chemicals to come in that he had ordered to treat the kitchen.</p> <p>On 12/26/2024 at 9:08 AM, V3 (Cook) stated the kitchen has always had issues with bugs. V3 stated that it gets better, then it gets worse. V3 stated the pest company was here earlier in the week and did a treatment on the kitchen. V3 stated that she has seen them (bugs) more in the dish room than anywhere else in the kitchen.</p> <p>On 12/26/2024 at 9:13 AM, V4 (Dietary Aide) stated she has seen bugs in the dish room. V4 stated they have been there for a while. V4 stated she has not seen any today but has seen them in the dish room.</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 - Many</p>	<p>On 12/26/2024 at 9:16 AM, V5 (Dietary Manager) stated they have had off and on problems with bugs being in the kitchen. V5 stated that on Monday, (Name of Pest Control Company) was at the facility and treated the kitchen. V5 stated that V8 assured her that this treatment would work and would take care of all the bugs. V5 stated (Name of Pest Control Company) had been doing routine treatments of the facility and it helped for a period of time. V5 stated that the morning staff and the evening staff are responsible for cleaning the kitchen. V5 stated that the kitchen was cleaned on 12/25/2024 before the evening staff went home. V5 stated she did not know there were bugs and debris on the floor, and she was not aware of the bones on the floor.</p> <p>On 12/26/2024 at 9:22 AM, V6 (Dietary Aide) stated she saw bugs in the dish room early this morning.</p> <p>On 12/26/2024 at 10:35 AM, V9 (Maintenance) stated that (Name of Pest Control Company) had been doing routine sprays on the facility. V9 stated that the last Administrator was not happy with that company and had threatened to fire them if they did not fix the bug problem. V9 stated that is when V8 (Pest Control Employee) took over coming to the facility.</p> <p>On 12/27/2024 at 8:42 AM, V3 (Cook) stated she has not seen any bugs today in the kitchen or dish room.</p> <p>On 12/31/2024 at 9:51 AM, V17 (Pest Control employee) stated the facility has an issue with roaches. V17 stated that cleanliness at the facility is an issue. V17 stated he's had conversations with the facility about the cleanliness in the kitchen being an issue. V17 stated he told the facility the bugs will not go to the bait when there are food particles all over the floor and counters. V17 stated that the new treatment plan is to treat the facility weekly and see how the progress is after 4 weeks. V17 stated that after the 4 weeks, they will readjust the treatment plan as needed. V17 stated that when his company was notified on 12/16/2024 of the bed bug problem they came into the facility on [DATE] and heat treated two rooms.</p> <p>According to https://www.pestworld.org/news-hub/pest-articles/keeping-kitchens-pest-free/, the following is recommended under Keeping Kitchens Pest Free:</p> <p>Prevention As a First Line of Defense Against Pests</p> <p>NPMA (National Pest Management Association) recommends the following preventative measures to ensure your kitchen, pantry . remain pest free:</p> <p>Immediately wipe up any crumbs or spills from countertops, tables, floors and shelves.</p> <p>Store food in airtight containers and dispose of garbage regularly in sealed receptacles.</p> <p>Eliminate all moisture sites, including leaking pipes and clogged drains.</p> <p>The facility Pest Control, Garbage and Refuse Policy documents: It is the policy of (Name of Corporation) that dumpsters are to be maintained so as to discourage rodents and pests and to prevent foul odors. The facility shall contract with a pest control vendor for routine inspections and monitoring and periodic pest control services to prevent and extinguish pest issues.</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 - Many</p>	<p>Procedure:</p> <ol style="list-style-type: none"> 1. Maintenance and dietary will monitor the outside dumpsters to ensure they are in good repair and that the lids are kept closed at all times 3. Facility staff shall monitor high risk areas of the facility for evidence of pests. 4. A Pest control vendor shall make routine, periodic visits for routine inspections and monitoring for pests. 5. If evidence of an infestation is present, staff shall notify the Administrator or maintenance director for increased pest control services. <p>The facility matrix report provided to this surveyor on 12/26/2024 documented a census of 85 in house with two in the hospital.</p>