

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145713	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/23/2024
NAME OF PROVIDER OR SUPPLIER Momence Meadows Nursing & Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE 500 South Walnut Momence, IL 60954	

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 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>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.</p> <p>31849</p> <p>Based on observation, interview and record review, the facility failed to follow the menu plan and serve residents with alternatives for food items refused. This applies to 11 of 11 (R1, R4, R5, R6, R7, R8, R9, R10, R11, R12, R14) residents reviewed for meal service.</p> <p>The findings include:</p> <p>The facility's lunch meal for 5/15/24 listed Cuban style pork chop, red beans and rice, chocolate mousse, corn bread, margarine, and beverage. Their menu for lunch, or the substitute menu was not posted for the residents on the notice board in the hallway. After checking the temperature V4 (Cook) began to plate the food for the residents. During Lunch instead of chocolate mousse they served Banana Cream Pie. Corn bread was not available during lunch. By the end of serving R4 and R15 did not get, red beans and rice, R4, R5, R6, R7, R8, R9, R10, R11, R12, and R14 did not receive Banana Cream Pie instead they were given Graham Crackers for dessert.</p> <p>On 5/21/24 dietary staff did not post the breakfast or lunch menu until 10:00AM and the menu in the kitchen and the menu posted in the hallway for the residents were not the same. Residents were noted to get glazed ham, broccoli, herb stuffing, dinner roll with margarine and pears with whipped topping.</p> <p>R1 was interviewed on 5/21/24 and stated that the menu served on 5/21/24 for lunch was not the planned menu and so R1 requested a vegetable salad in place. According to R1, dietary staff refused to provide the salad since she did not order it the previous day. R1 added that most days the menu is not posted for residents.</p> <p>R2 and R4 were also interviewed and stated that the menu is not posted and that food service often changes the menu and so residents cannot order the substitute the day before. Both residents claimed that the facility runs out of food items and they just, give us what they have.</p> <p>V3 (Dietary Manager) was interviewed on 5/15/24 at 12:20PM and stated that the food order is not always correct. V3 added that there was a mix up with the new system.</p> <p>V1 (Administrator) confirmed on 5/21/24 at 10:09AM that the facility should not run out of food.</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 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Facility 's grievances and concern forms were reviewed from February until May of 2024 and the resident council minutes were also reviewed. On 4/5/24 the Resident council minutes indicated that the kitchen keeps running out of hot dog and hamburger buns and alternative selections continue to not be followed. The residents also complained that food portions have gotten smaller. On 4/24/24 Resident council Meeting minutes indicated Kitchen keeps running out of hot dog buns and hamburger buns.</p> <p>Facility provided undated unsigned policy and procedure for meal service; it indicated under Procedure 2. In part . Each resident will be served a diet that is appropriate for the physical cognitive and the psychosocial need of the resident.</p> <p>The menu Filing and substitution policy indicated under guideline, all menus served shall be kept on file for 30 days. All menus for the current week shall be clearly posted and dated to adequately document foods that have been served, and guides staff in proper meal service.</p> <p>3. The menu for the current week is posted somewhere accessible to residents and families. 4. change made for any menu follow the substitution procedure see menu substitution guideline.</p>

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<p>F 0806</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.</p> <p>31849</p> <p>Based on observation, interview and record review, the facility failed to provide alternate food to meet residents need. This applies to 3 of 3 residents (R1, R6, and R15) reviewed for alternate food and nutritional adequacy in the sample of 15.</p> <p>R1's MDS (minimum data set) dated April 25, 2024, indicated R1 has a BIMS (brief interview of mental status) score of 15 and she is cognitively intact. On 5/21/24 at 9:30 AM, R1 stated during interviews that she is not getting the food alternatives because she did not order the item the previous day. R1 stated that during the lunch meal she did not get the item that was listed on the planned menu and she requested a vegetable salad. According to R1, the dietary staff refused to give R1 the vegetable salad that she wanted since the menu as planned was not served. R1 added that staff refused to give her the salad since she did not order the salad the previous day. R1 continued and stated that residents do not get a breakfast menu but whatever the kitchen wants to serve.</p> <p>On 5/21/2024, R6 stated during interview that dietary staff refused to give R6 the peanut butter and jelly sandwich as a substitute. R6 is documented as being cognitively intact per the latest MDS assessment. R4 was also not given a peanut butter and jelly sandwich as requested during the meal.</p> <p>R15 is also assessed to be cognitively intact and interview per the MDS assessment of 4/25/24. R15 stated during interview of 5/21/24 at 9:47AM that the kitchen did not serve the lactose free milk to R15. According to V3 (Dietary Manager) the facility cannot obtain this item.</p> <p>V3 (Dietary Manager) was interviewed on 5/16/24 at 12:20PM and stated that meal substitutes need to be ordered the day before.</p> <p>V1 (Facility Administrator) stated during interview of 5/21/24 that substitutes do not need to be ordered the previous day.</p> <p>The resident grievances and concerns document complaints of the kitchen running out of food items such as hotdog and hamburger buns and the kitchen not serving the alternative food items.</p> <p>Facility's policy stated substitution was reviewed and under Guideline: 2. Indicted his substitution will be selected from the same food group as the item being replaced. his salad consisting of mostly fruit shall be replaced with a fruit whereas a salad consisting of cottage cheese and fruit is considered a protein item and will need to be substituted accordingly.</p>		