

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155491	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/27/2024
NAME OF PROVIDER OR SUPPLIER Majestic Care of Connersville		STREET ADDRESS, CITY, STATE, ZIP CODE 1029 E 5th Street Connersville, IN 47331	
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 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>25054</p> <p>Based on observation, interview, and record review the facility failed to maintain the entry door into the main kitchen resulting in rodents entering the (west) building for 1 of 2 kitchens observed. This had the potential to affect the 42 residents that resided in the west building.</p> <p>Findings include:</p> <p>The resident listing provided by the Administrator on 9/25/24 at 11:00 a.m., indicated there were 42 residents residing in the west building.</p> <p>During an observation and interview with the Dietary Manager on 9/25/24 at 11:05 a.m., there were mice traps set in the west building kitchen and the east kitchen. The Dietary Manager indicated a pest control company came every month and checked the traps.</p> <p>During an observation on 9/25/24 at 12:30 p.m., the west building kitchen door to the outside was shut and did not have a seal around the door.</p> <p>During an interview with Licensed Practical Nurse (LPN) 1 on 9/25/24 at 1:28 p.m., indicated she had seen a mouse in Resident H's room in the west building last week and reported it to the Maintenance staff.</p> <p>During an interview with the Pest Control Technician on 9/26/24 at 11:32 a.m., indicated he was the technician that serviced the facility monthly, and they had an ongoing problem with mice in the west building. The Pest Control Technician indicated from his assessment of the facility the cause was from the kitchen door from the kitchen to the outside not sealing all the way, shutting all the way and staff propping the door open. The Pest Control Technician indicated he had talked with the head of maintenance about the door.</p> <p>During an observation and interview with the Dietary Manager in Training on 9/26/24 at 1:18 p.m., there was a brick located to the right of the exterior kitchen door in the west building. The Dietary Manager in Training indicated staff used the brick to prop open the kitchen door when dietary staff were coming in and out and the dietary staff did not close the door all the way to latch because it locked.</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 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview with the Maintenance Director on 9/27/24 at 11:14 a.m., indicated he had attempted to fix the kitchen door in the west building numerous times, but it needed replaced. There had been multiple times the Pest Control Technician had taken a rock out of the door where staff had propped it open. The dietary staff say they prop the door open because it locks when they shut it, and they cannot get back in. The dietary staff broke the lock mechanism off the doorknob.</p> <p>The pest control report for the west building, dated 5/24/24, indicated the action required was to keep the kitchen door shut to avoid pest entry and/or fix the door so it would fully close. The door was observed to be slightly open and was often propped open. It was unclear if the door could close properly. The door was opened on 3/29/24. The rodent traps had two house mice in them.</p> <p>The pest control report for the west building, dated 6/24/24, indicated there were two deer mice in the rodent trap.</p> <p>The pest control report for the west building, dated 7/29/24, indicated there was one house mouse in the rodent trap.</p> <p>The pest control report for the west building, dated 8/26/24, indicated the action required was to keep the kitchen door shut to avoid pest entry and/or fix the door so it would fully close. The door was observed to be slightly open and was often propped open. It was unclear if the door could close properly.</p> <p>The pest control report for the west building, dated 9/20/24, indicated the action required was to keep the door shut to avoid pest entry and/or fix the door so it would fully close. The door was observed slightly open and was often found propped open. It was unclear if the door could close properly. There was one house mouse in the rodent trap.</p> <p>The pest control policy provided by the Administrator on 9/27/24 at 11:05 a.m., indicated it was the facilities policy to maintain an effective pest control program that eradicates and contains common household rodents.</p> <p>This citation relates to Complaint IN00443547.</p> <p>3.1-19(f)(4)</p>		