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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 225433 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 05/15/2024 |
| NAME OF PROVIDER OR SUPPLIER Aberjona Rehabilitation and Nursing Center | | STREET ADDRESS, CITY, STATE, ZIP CODE 184 Swanton Street, #1998 Winchester, MA 01890 | |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

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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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Ensure services provided by the nursing facility meet professional standards of quality.</p> <p>46339</p> <p>Based on record review, policy review and interviews, the facility failed to provide services that met professional standards of quality for one Resident (#261) out of a total sample of 22 residents. Specifically, the facility failed to follow a physician order for documenting total volume intake for Resident #261.</p> <p>Findings include:</p> <p>Review of facility policy titled Care and Treatment of Feeding Tubes, dated 2/2023, indicated the following:</p> <ul style="list-style-type: none"> -Feeding tubes will be utilized according to physician orders, which typically include: the kind of feeding and its caloric value, volume, duration, mechanism of administration, and frequency of flush. <p>Resident #261 was admitted to the facility in May 2024 with diagnoses including dysphagia (difficulty chewing and swallowing) and malignant neoplasm of esophagus.</p> <p>Review of the Brief interview for Mental Status exam dated 5/10/24, indicated the Resident scored a 15 out of a possible 15, indicating Resident #261 has intact cognition.</p> <p>Review of the physicians' orders dated 5/10/24 indicated the following:</p> <ul style="list-style-type: none"> -Jevity 1.5 calorie/fiber oral liquid (Nutritional supplement) Give 240 milliliter (ml) via Gastrostomy tube (g-tube) (G-tube: tube inserted through the abdomen into the stomach to provide nutrition) three times a day related to dysphagia. -Flush g-tube with a bolus free water flush 175 ml four times a day. -G-tube flush orders with 60 ml's before and after administration of medication, administer five ml of water in between medication administered. -Document total intake via g-tube every night shift. <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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Review of Medication Administration Record (MAR) for May 2024 failed to indicate a complete daily total intake was documented, as ordered by the Physician. Rather, the night shift nurses were documenting the intake for the night shift only.</p> <p>During an interview on 5/15/24 at 9:56 P.M., Nurse #1 said the total daily intake should have been documented, but was not.</p> <p>During an interview on 5/15/24 at 10:02 P.M., Unit Manager #1 said the order was entered incorrectly, the total daily intake should be documented and not only for night shift.</p> <p>During an interview on 5/15/24 at 10:36 A.M., the Director of Nursing said the total intake should show the volume of the entire day.</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>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>48990</p> <p>Based on observation, policy review, and interview, the facility failed to store food in accordance with professional standards for food service safety. Specifically, the facility failed to:</p> <ol style="list-style-type: none"> 1. Ensure food was labeled and dated. 2. Ensure beard nets were worn in the food preparation area. 3. Ensure employee meals were not stored with resident food and ingredients. <p>Findings include:</p> <p>Review of policy titled Food Safety Requirements, revised 2/2023, indicated, but was not limited to the following:</p> <ul style="list-style-type: none"> -Food will be stored, prepared, distributed, and served in accordance with professional standards for food service safety. -Dry food storage - keep foods/beverages in a clean, dry area off the floor. -Refrigerated storage - labeling, dating, and monitoring refrigerated food, including, but not limited to leftovers, so it is used by its use-by date, or frozen (where applicable)/discarded and keeping food covered in tight containers. <p>Review of policy titled Food Safety Requirements, revised 2/2023, indicated, but was not limited to the following:</p> <ul style="list-style-type: none"> -Dietary staff must wear hair restraints (e.g., hairnet, hat, and/or beard restraint) to prevent hair from contacting food. <p>Review of the 2022 U.S. Food and Drug Administration (FDA) food code indicated the following:</p> <ul style="list-style-type: none"> -FOOD EMPLOYEES shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively keep their hair from contacting exposed FOOD -FOOD shall be protected from contamination by storing the FOOD: in a clean, dry location; where it is not exposed to splash, dust, or other contamination; and at least 15 cm (6 inches) above the floor. <p>1. During the initial kitchen walk through on 5/14/24 at 7:15 A.M., the surveyor made the following observations in the walk in refrigerator:</p> <ul style="list-style-type: none"> -One carton of fish base, open and undated. <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>-One carton of lobster base, open and undated.</p> <p>-One package of single sliced cheese, open and updated.</p> <p>-One half gallon of milk, open and undated.</p> <p>-One half gallon of orange juice, open and undated.</p> <p>-One half gallon of half and half dairy creamer, open and undated.</p> <p>-One bottle of lemon juice, open and undated.</p> <p>-One large open container of fresh spinach, open and undated.</p> <p>-One tray applesauce poured into individual single serving bowls, undated.</p> <p>-One tray of fruit cocktail poured into individual single serving bowls, undated.</p> <p>During the initial kitchen walk through on 5/14/24 at 7:15 A.M., the surveyor made the following observations in the dry storage area:</p> <p>-One large container of chocolate pudding, open and undated.</p> <p>-One empty, open cookie wrapper in a box of dry pudding mix.</p> <p>-One open, uncovered, undated bag of uncooked lasagna.</p> <p>During the initial kitchen walk through on 5/14/24 at 7:15 A.M., the surveyor made the following observations in the walk-in freezer:</p> <p>-One box of frozen chicken placed directly on the floor.</p> <p>During a tour of the unit kitchenettes on 5/15/24 at 9:00 A.M., the surveyor made the following observation:</p> <p>-Two half gallons of milk, opened and undated.</p> <p>-One half gallon of orange juice dated 5/5, which was ten days prior to the observation.</p> <p>-One unopened yogurt container, expiration date 5/4/24, which was eleven days prior to the observation.</p> <p>During an interview on 5/15/25 at 9:55 A.M., the Food Service Director (FSD) said containers should be dated when opened if they have a shortened expiration date once opened. The FSD said he did not have a system in place for ensure milk and juices were not served after seven days of being opened.</p> <p>During an interview on 5/15/25 at 11:32 A.M., the Administrator said the facility should be following their policy for labeling and dating foods and beverages.</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>2. During initial kitchen walk through on 5/14/24 at 7:15 A.M., the surveyor observed three male dietary staff members with beards who were not wearing beard nets, two of which were actively preparing food. The beards were long enough that skin was not visible through beard.</p> <p>During an interview on 5/14/24 at 7:24 A.M., the FSD said he has not required beard nets to be worn during cooking, preparing, or assembling food in the kitchen.</p> <p>During an interview on 5/15/25 at 11:32 A.M., the Administrator said she was unaware beard nets were required and would need to refer to the facility policy on beard nets.</p> <p>3. On 5/15/24 at 9:53 A.M., the surveyor made the following observation in the kitchen's walk-in refrigerator:</p> <p>-An undated, glass reusable container, filled with meat and vegetables.</p> <p>During an interview on 5/15/24 at 9:53 A.M., The FSD said it was a staff members lunch, and that it should not be in there.</p> | | |