

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 235574	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/07/2024
NAME OF PROVIDER OR SUPPLIER Countryside Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2121 Robinson Rd Jackson, MI 49203	

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 0578</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate an advance directive.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38383</p> <p>Based on interview and record review, the facility failed to 1) ensure two residents (#3 and #37) who had not been deemed incapacitated were acting as their own responsible party; and 2) ensure code status wishes were being honored for one (Resident #37) of two reviewed.</p> <p>Findings include:</p> <p>Resident #37 (#37):</p> <p>Review of the medical record reflected R37 admitted to the facility on [DATE] and readmitted [DATE], with diagnoses that included diabetes, depression and schizophrenia. The quarterly Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of [DATE], reflected R37 scored 13 out of 15 (cognitively intact) on the Brief Interview for Mental Status (BIMS-a cognitive screening tool).</p> <p>R37's medical record reflected a Physician's Order for full code (cardiopulmonary resuscitation/CPR and life-saving efforts in an emergency). The miscellaneous section of R37's medical record reflected a Do Not Resuscitate (DNR) document with an upload and effective date of [DATE].</p> <p>In an interview on [DATE] at 2:31 PM, Director of Nursing (DON) B reported R37 was not his own person (own responsible party) and had a Durable Power of Attorney (DPOA). She reported R37 could not sign his own DNR form, and it was not valid since he signed it himself. DON B reported R37 had been deemed incapacitated prior to his admission to the facility.</p> <p>On [DATE] at 3:33 PM, a request was made for documentation reflective of R37 being deemed unable to make his own medical and treatment decisions.</p> <p>R37's OBRA Level II Evaluation for ,d+[DATE] reflected he did not have a legal representative and still acted as his own person with medical and daily choices. He did have a conservator that made financial decisions on his behalf, due to his traumatic brain injury from being hit by a car when he was in his thirties.</p> <p>On [DATE] at approximately 03:38 PM, DON B showed a DPOA document for [DATE], which she said reflected R37 wanted to be a DNR. DON B was queried on whether or not R37 was his own responsible party, as he signed that document in ,d+[DATE]. A request was made for the document to be provided to the Survey Team but was not provided prior to the survey exit on [DATE].</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 0578</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>In an interview on [DATE] at 9:37 AM, DON B reported the facility did not have anything that reflected R37 had been deemed incompetent. She reported R37 was a DNR when he went to the hospital in February 2024. He returned to the facility with a full code status. DON B reported the Assistant Director of Nursing (ADON) spoke with R37 on [DATE], and he wanted to be a full code.</p> <p>32064</p> <p>Resident #3 (R3)</p> <p>Review of the medical record revealed R3 admitted to the facility on [DATE] with diagnoses that included dementia. The Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of [DATE] revealed R3 scored 5 out of 15 (severe cognitive impairment) on the Brief Interview for Mental Status (BIMS-a cognitive screening tool).</p> <p>R3's profile revealed their spouse was their responsible party.</p> <p>In an interview on [DATE] at 1:30 PM, Director of Nursing (DON) B and Assistant Director of Nursing (ADON) C reported as of [DATE], R3's spouse was their decision maker.</p> <p>In an interview on [DATE] at 8:13 AM, Nursing Home Administrator (NHA) A reported R3's spouse made their medical decisions. NHA A provided a patient Patient Advocate form where R3 designated their spouse as their advocate. NHA A reported there was no documentation that R3 had been deemed incompetent to make their own medical decisions.</p> <p>In an interview on [DATE] at 8:47 AM, when asked where it was documented that R3 was not able to make their own decisions as of [DATE], DON B reported the facility was not able to locate the capacity determination documentation.</p>

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<p>F 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives an accurate assessment.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 32064</p> <p>Based on interview and record review, the facility failed to ensure accurate coding of Minimum Data Set (MDS) Assessments for two (Resident #37 and Resident #54) of 13 reviewed.</p> <p>Findings include:</p> <p>Resident #54 (R54)</p> <p>Review of the medical record revealed R54 admitted to the facility on [DATE].</p> <p>Review of the Discharge Summary revealed R54 discharged home on 3/15/24.</p> <p>Review of the Discharge MDS with an Assessment Reference Date (ARD) of 3/15/24 revealed R54 discharged to the hospital.</p> <p>In an interview on 06/06/24 at 10:28 AM, MDS Coordinator D reported R54 discharged home and agreed the discharge MDS was coded incorrectly.</p> <p>38383</p> <p>Resident #37 (R37):Review of the medical record reflected R37 admitted to the facility on [DATE] and readmitted [DATE], with diagnoses that included diabetes, depression and schizophrenia. The quarterly Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 3/27/24, reflected R37 scored 13 out of 15 (cognitively intact) on the Brief Interview for Mental Status (BIMS-a cognitive screening tool).</p> <p>The quarterly MDS, with an ARD of 3/27/24, reflected coding for antidepressant use. R37's medical record did not reflect that he had been prescribed an antidepressant since his admission to the facility.</p> <p>In an interview on 06/07/24 at 09:42 AM, MDS Coordinator D acknowledged the coding error and reported she may have miscoded R37's Lurasidone (antipsychotic medication) as an antidepressant.</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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 22050</p> <p>Based on observations, interviews, and record reviews, the facility failed to: (1) effectively clean and maintain food service equipment, (2) date mark all potentially hazardous ready-to-eat food products, and (3) effectively date, label, and store food products effecting 55 residents, resulting in the increased potential for cross-contamination, bacterial harborage, resident foodborne illness, and inadequate mechanical dish machine sanitization final rinse dispersion.</p> <p>Findings include:</p> <p>On 06/06/24 at 08:28 A.M., A comprehensive tour of the food service was conducted with Dietary Manager E. The following items were noted:</p> <p>The Mechanical Dish Machine wash and final rinse temperature gauges were observed loose-to-mount and fogged with excessive moisture accumulation. The final rinse Pounds-Per-Square-Inch (PSI) gauge was also observed 90% full of water and reading off-scale beyond 30 (PSI) during the final rinse cycle. Dietary Manager E indicated he would contact maintenance for necessary repairs.</p> <p>The 2017 FDA Model Food Code section 4-501.11 states: (A) EQUIPMENT shall be maintained in a state of repair and condition that meets the requirements specified under Parts 4-1 and 4-2. (B) EQUIPMENT components such as doors, seals, hinges, fasteners, and kick plates shall be kept intact, tight, and adjusted in accordance with manufacturer's specifications. (C) Cutting or piercing parts of can openers shall be kept sharp to minimize the creation of metal fragments that can contaminate FOOD when the container is opened.</p> <p>The 2017 FDA Model Food Code section 4-501.113 states: The flow pressure of the fresh hot water SANITIZING rinse in a WAREWASHING machine, as measured in the water line immediately downstream or upstream from the fresh hot water SANITIZING rinse control valve, shall be within the range specified on the machine manufacturer's data plate and may not be less than 35 kilopascals (5 pounds per square inch) or more than 200 kilopascals (30 pounds per square inch).</p> <p>The Dietary Manager's office flooring surface was observed extremely soiled with accumulated and encrusted dirt and grime residue. The Dietary Manager's office was also observed in complete disarray (boxes, cook pans, etc.). Dietary Manager E indicated he would have staff thoroughly clean and sanitize the flooring surface as soon as possible.</p> <p>Walk-In Cooler: The flooring surface was observed with accumulated and encrusted milk residue, directly beneath the milk storage rack. Dietary Manager E indicated he would have staff thoroughly clean and sanitize the flooring surface as soon as possible.</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>The 2017 FDA Model Food Code section 6-501.13 states: (A) Except as specified in (B) of this section, only dustless methods of cleaning shall be used, such as wet cleaning, vacuum cleaning, mopping with treated dust mops, or sweeping using a broom and dust-arresting compounds. (B) Spills or drippage on floors that occur between normal floor cleaning times may be cleaned: (1) Without the use of dust-arresting compounds; and (2) In the case of liquid spills or drippage, with the use of a small amount of absorbent compound such as sawdust or diatomaceous earth applied immediately before spot cleaning.</p> <p>The garbage disposal overhead spray arm valve assembly was observed invading the flood plane level of the sink basin. Dietary Manager E indicated he would have maintenance make necessary repairs as soon as possible.</p> <p>The 2017 FDA Model Food Code section 5-205.12 states: Nondrinking water may be of unknown or questionable origin. Wastewater is either known or suspected to be contaminated. Neither of these sources can be allowed to contact and contaminate the drinking water system.</p> <p>The 2017 FDA Model Food Code section 5-205.15 states: Improper repair or maintenance of any portion of the plumbing system may result in potential health hazards such as cross connections, backflow, or leakage. These conditions may result in the contamination of food, equipment, utensils, linens, or single-service or single-use articles. Improper repair or maintenance may result in the creation of obnoxious odors or nuisances and may also adversely affect the operation of warewashing equipment or other equipment which depends on sufficient volume and pressure to perform its intended functions.</p> <p>The can opener mounting bracket perimeter was observed soiled with accumulated and encrusted food residue, between the bracket assembly and table surface.</p> <p>The True 2-door reach-in cooler door gaskets were observed soiled with accumulated and encrusted dust and dirt deposits. Dietary Manager E indicated he would have staff thoroughly clean and sanitize the door gaskets as soon as possible.</p> <p>The 2017 FDA Model Food Code section 4-601.11 states: (A) EQUIPMENT FOOD-CONTACT SURFACES and UTENSILS shall be clean to sight and touch. (B) The FOOD-CONTACT SURFACES of cooking EQUIPMENT and pans shall be kept free of encrusted grease deposits and other soil accumulations. (C) NonFOOD-CONTACT SURFACES of EQUIPMENT shall be kept free of an accumulation of dust, dirt, FOOD residue, and other debris.</p> <p>The True 2-door reach-in cooler interior light bulb was observed non-functional. Dietary Manager E indicated he would have maintenance replace the faulty light bulb as soon as possible.</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>The 2017 FDA Model Food Code section 6-303.11 states: The light intensity shall be: (A) At least 108 lux (10 foot candles) at a distance of 75 cm (30 inches) above the floor, in walk-in refrigeration units and dry FOOD storage areas and in other areas and rooms during periods of cleaning; (B) At least 215 lux (20 foot candles): (1) At a surface where FOOD is provided for CONSUMER self-service such as buffets and salad bars or where fresh produce or PACKAGED FOODS are sold or offered for consumption, (2) Inside EQUIPMENT such as reach-in and under-counter refrigerators; and (3) At a distance of 75 cm (30 inches) above the floor in areas used for handwashing, WAREWASHING, and EQUIPMENT and UTENSIL storage, and in toilet rooms; and (C) At least 540 lux (50 foot candles) at a surface where a FOOD EMPLOYEE is working with FOOD or working with UTENSILS or EQUIPMENT such as knives, slicers, grinders, or saws where EMPLOYEE safety is a factor.</p> <p>Rehabilitation Refreshment Room: The [NAME] Beach stainless steel toaster was observed with accumulated and encrusted food residue. Dietary Manager E indicated he would have staff thoroughly clean and sanitize the toaster as soon as possible.</p> <p>The 2017 FDA Model Food Code section 4-601.11 states: (A) EQUIPMENT FOOD-CONTACT SURFACES and UTENSILS shall be clean to sight and touch. (B) The FOOD-CONTACT SURFACES of cooking EQUIPMENT and pans shall be kept free of encrusted grease deposits and other soil accumulations. (C) NonFOOD-CONTACT SURFACES of EQUIPMENT shall be kept free of an accumulation of dust, dirt, FOOD residue, and other debris.</p> <p>On 06/07/24 at 04:30 P.M., Record review of the Policy/Procedure entitled: Sanitation Inspection dated 08-11-2022 revealed under Policy: It is the policy of this facility, as part of the department's sanitation program, to conduct inspections to ensure food service areas are clean, sanitary, and in compliance with applicable state and federal regulations. Record review of the Policy/Procedure entitled: Sanitation Inspection dated 08-11-2022 further revealed under Policy Explanation and Compliance Guidelines: (1) All food service areas shall be kept clean, sanitary, free from litter, rubbish, and protected from rodents.</p> <p>32064</p> <p>During an initial kitchen tour on 06/05/24 at 10:08 AM with Dietary Manager (DM) E, the following observations were made:</p> <ul style="list-style-type: none"> - The reach in refrigerator contained a tray of frozen vegetables that were not covered. DM E reported they were to be cooked later that day. - The reach in refrigerator contained a container of grapes with an expiration date of 6/4/24. DM E removed the container from the refrigerator. - The reach in refrigerator contained an opened half gallon of whole milk that was not dated when opened. DM E removed the milk from the refrigerator. - The walk-in refrigerator contained a container of pasta salad that was not dated. DM E reported they believed it was a staff member's lunch. <p>According to the 2017 FDA Model Food Code, section 3-305.14 Food Preparation, During preparation, unPACKAGED FOOD shall be protected from environmental sources of contamination.</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>According to the 2017 FDA Model Food Code, Section 3-501.17 Date Marking Potentially Hazardous Ready-to-Eat Food, Except when PACKAGING FOOD using a REDUCED OXYGEN PACKAGING method as specified under S 3-502.12, and except as specified in (E) and (F) of this section, refrigerated, READY-TO EAT, TIME/TEMPERATURE CONTROL FOR SAFETY FOOD prepared and held in a FOOD ESTABLISHMENT for more than 24 hours shall be clearly marked to indicate the date or day by which the FOOD shall be consumed on the PREMISES, sold, or discarded when held at a temperature of 5 C (41 F) or less for a maximum of 7 days. The day of preparation shall be counted as Day 1.</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>22050</p> <p>Based on observations, interviews, and record reviews, the facility failed to effectively clean and maintain the physical plant effecting 55 residents, resulting in the increased likelihood for cross-contamination, bacterial harborage, and decreased air quality.</p> <p>Findings include:</p> <p>On 06/07/24 at 09:25 A.M., A common area environmental tour was conducted with Maintenance Technician G and Director of Housekeeping and Laundry Services F. The following items were noted:</p> <p>Nursing Unit</p> <p>Nurses Station: 1 of 2 chairs were observed with (worn, torn, etched) armrests. The hand sink basin backsplash board was also observed (etched, scored, raised). The caulking bead was further observed loose-to-mount and missing periodically. The damaged backsplash board measured approximately 4-inches-wide by 6-feet-long.</p> <p>Beauty Shop: The cosmetology chair was observed soiled with accumulated and encrusted dust and dirt deposits. Director of Housekeeping and Laundry Services F indicated she would have staff thoroughly clean and sanitize the cosmetology chair as soon as possible.</p> <p>Rehabilitation Unit</p> <p>Nurses Station: 2 of 2 chairs were observed (etched, scored, particulate). Maintenance Technician G indicated he would remove the faulty chairs as soon as possible.</p> <p>Meadow Unit (Memory Care)</p> <p>The 200 Unit and 300 Unit corridor flooring surface carpeting was observed heavily stained and soiled with dust, dirt, and food residue deposits.</p> <p>Dining Room: The return-air-exhaust ventilation grill was observed heavily soiled with dust and dirt deposits. Director of Housekeeping and Laundry Services F indicated she would have staff thoroughly clean and sanitize the ventilation grill as soon as possible.</p> <p>Soiled Utility Room: The hopper faucet assembly spout was observed heavily soiled with mineral (calcium and lime) deposits.</p> <p>Nurses Station: The desk countertop Formica laminate edge surface was observed (etched, scored, missing). The damaged Formica laminate surface measured approximately 12-feet-long. One chair was also observed (etched, scored, particulate).</p> <p>Main Dining Room Corridor</p> <p>(continued on next page)</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Janitor Closet: Three 4-inch-wide by 4-inch-long ceramic tiles were observed missing, adjacent to the mop sink basin. Two 6-inch-wide ceramic coving tiles were also observed missing, within the room perimeter. Maintenance Technician G indicated he would make necessary repairs as soon as possible.</p> <p>Activity Room: The flooring surface carpet was observed sporadically stained and soiled with dust, dirt, and grime deposits.</p> <p>Janitor Room: The overhead light assembly was observed non-functional.</p> <p>On 06/07/24 at 11:40 A.M., An environmental tour of sampled resident rooms was conducted with Maintenance Technician G and Director of Housekeeping and Laundry Services F. The following item was noted:</p> <p>120: The Bed 2 overbed light assembly switch was observed non-functional.</p> <p>On 06/07/24 at 05:00 P.M., Record review of the Policy/Procedure entitled: Routine Cleaning and Disinfection dated 08-11-2022 revealed under Policy: It is the policy of this facility to ensure the provision of routine cleaning and disinfection in order to provide a safe, sanitary environment and to prevent the development and transmission of infections to the extent possible.</p> <p>On 06/07/24 at 05:15 P.M., Record review of the Policy/Procedure entitled: Environmental Services Inspection dated 08-11-2022 revealed under Policy: It is the policy of this facility to regularly monitor environmental services to ensure the facility is maintained in a safe and sanitary manner and assessed on a regular basis.</p>		