

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  245254	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  03/20/2025
NAME OF PROVIDER OR SUPPLIER  Regina Senior Living		STREET ADDRESS, CITY, STATE, ZIP CODE  1175 Nininger Road Hastings, MN 55033	

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 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><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 46804</p> <p>Based on observation, interview, and document review, the facility failed to ensure food stored in the refrigerators and dry storage were labeled, dated and discarded properly. In addition, the facility failed to consistently track and monitor dishwasher temperatures for both the wash and rinse cycles, and take timely action to correct the temperatures, for 1 of 1 dishwasher observed, and failed to monitor sanitation level of the three-compartment sink and cleaning of food equipment. This deficient practice had the potential to affect all 53 residents who received food from the refrigerators and the kitchen, as well as staff, who ate food served from dishes and tableware that were cleaned in the dishwasher.</p> <p>Findings include:</p> <p>Label, cover and date:</p> <p>During an observation and interview on 3/17/25 at approximately 7:15 p.m., there were two large clear plastic undated containers with Raisin Bran and [NAME] Krispies. The regional director clinical services (RDCS) verified the cereal should be labeled and dated. The RDCS requested dietary aide (DA)-A to throw the unlabeled cereal as there was no date.</p> <p>During an observation on 3/17/25 at 7:20 p.m., in the walk-in freezer there were tomato paste balls on a sheet pan that were not covered or dated. Also, there was partially covered Tator tots on a pan that had no date.</p> <p>During an observation on 3/17/25 at 7:25 p.m., in the reach in cooler there was a 12-quart container that was not labeled or dated which contained assorted melons and grapes.</p> <p>During an observation on 3/17/25 at 7:26 p.m., in the walk-in cooler there were frozen pancakes in shallow pan labeled [NAME] but not dated. There was a covered quarter pan of sausage that was covered but not dated.</p> <p>During an interview on 3/18/25 at 11:15 a.m., food service director (FSD) verified all items should be labeled, covered and dated as soon as food is removed from its original container. The FSD stated it was important to label and date food items to know when food items are fresh.</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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>During an observation on 3/18/25 at 11:20 a.m., tater tots were in a deep pan in the walk-in freezer. The tater tots were not labeled or dated. At 2:34 p.m. the FSD stated the tater tots were not labeled and dated but should have been.</p> <p>Equipment:</p> <p>During two observations on 3/17/25 at approximately 7:15 p.m., and 3/18/25 at 11:53 a.m., the standing food mixer had dried creamy white substance around the knob that connects the whip.</p> <p>During an observation on 3/17/25 at 7:38 p.m., there was a thick black substance on both the range grate and grill grates. The corner grate of the stove had about one to two ounces of raw ground beef under the grate.</p> <p>During an observation on 3/17/25 between 7:15 a.m., and 7:45 p.m., there was a sign which indicated the daily weekly cleaning schedule for cooks with a beginning date of 3/14/25. The sheet indicated 3/17/25, cleaning duties had been signed off. There were no entries for the 3/14/25, 3/15/25, or 3/16/25.</p> <p>During an interview on 3/18/25, between 11:15 a.m. and 11:45 a.m. the FSD verified the cleaning check list should be completed daily.</p> <p>3 compartment sinks:</p> <p>During an observation and interview on 3/17/25 at 7:15 p.m. to 7:45 p.m., an observation was made of no log to monitor the sanitizer of the three-compartment sink. DA-A stated the three-compartment sink had test strips, but most dishes went through the dishwasher. DA-A stated she was not aware of how to use the sanitation test strips for the three-compartment sink.</p> <p>During an observation and interview on 3/18/25 at 11:46 a.m., an observation was made of no sanitation log for the three-compartment sink. The FSD stated there was no log to test the sanitation of the sanitizer in the three-compartment sink.</p> <p>During an observation and interview on 3/18/25 11:37 a.m., the third sink in the three-compartment sink contained water that was rust color and was 1/3 full of liquid. The FSD verified they did not have a log to monitor the sanitation of the 3-compartment sink. The FSD stated she planned to implement a sanitation log to monitor the sanitation level starting 3/19/25, after she scheduled a staff meeting.</p> <p>Dish machine:</p> <p>During an observation and interview on 3/17/25 between 7:15-7:45 p.m., the dishwashing log was missing 15 days of monitoring the temperature of the dish machine. DA-A stated temperatures of dish machine should be taken three times a day.</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>During an observation and interview on 3/18/25 at 11:46 a.m., the temperature log for the dish machine was missing several entries to monitor the temperature of the wash and rinse cycles. The FSD stated it was her goal to document the dish machine temperatures at least twice a day, but each shift should complete at each meal. The FSD verified the documentation to monitor the temperature of the dish machine was not completed and was not acceptable. The FSD confirmed it was important that the dishes were sanitized properly before dishes were used.</p> <p>The Dish Machine Temperature Log dated 3/25, indicated there were a total of 32 missing entries out of 51 entries of documentation for the dish machine temperature from March 1, 2025, until March 17, 2025.</p> <p>The facility Food Protection Methods and Standards policy dated 2012, indicated all food items should be labeled, and date marked to identify when food was prepared or opened or when food must be used or discarded.</p> <p>The facility Dishwashing Procedures policy dated 2019, indicated a three-compartment sink may be used to wash pots and pans by hand. Sanitation is completed in the third compartment. Complete immersion for at least 30 seconds in 170-degree water or 75-degree water containing 50 ppm hypochlorite or 12.5 ppm iodine or a quaternary sanitizer dispensed per manufactures directions.</p> <p>The facility Dishwashing Temperature Monitoring Logs policy dated 2019, indicated a log must be completed of the wash and rinse temperatures. Entries must be made daily. The Culinary Director was responsible to monitor daily completion of the dishwashing temperature logs.</p>