

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  245349	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/24/2024
NAME OF PROVIDER OR SUPPLIER  Stewartville Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE  120 Fourth Street Northeast Stewartville, MN 55976	

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 0801</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, including a qualified dietician.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 42355</p> <p>Based on interview and record review, the facility failed to employ either a full-time registered dietitian (RD) or a qualified dietary manager (DM) to carry out the functions of the food and nutritional service. This had the potential to affect 45 of 45 residents who resided in the facility.</p> <p>Findings include:</p> <p>During an interview on 5/24/24 at 9:12 a.m., [NAME] (C)-A, indicated the previous DM walked out earlier this month and the regional manager quit in April (2024). C-A had been doing the orders and the schedule for the past week. During a clarifying interview on 5/24/24 at 12:30 p.m., C-A stated she has not had any formal training for DM position and there was [NAME] currently in training for that position. C-A further stated the facility's registered dietician (RD), does not come into the kitchen when the RD is at the facility and has not been providing any support since the DM walked out. C-A could not articulate when RD was last at the facility.</p> <p>During an interview on 5/23/24 at 7:00 p.m., the administrator indicated the facility's dietary staff were contracted staff under an agreement with an outside company. Administrator verified there had not been a dietary manager since 5/10/24. There had been a lack of communication from the company on exactly when they would be sending a replacement but thought it would be soon. Administer further stated the registered dietician position was also a contracted position and was last at the facility in April 2024.</p> <p>During an interview on 5/24/24 at 1:59 p.m., dietary company regional director of operations (RDO-A) stated an awareness there was not DM at the facility and a new DM was hired but was not able to start because of delayed results from a pending back ground study. RDO-A indicated if dietary staff needed support they could call for guidance.</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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F 0801  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Many	Review of the facility contracted dietary company's policy dated 10/2022, titled, Professional staffing, HCSG policy 001, indicated there should be a qualified dietician or other clinically qualified nutrition professional, either full or part time. If the qualified dietician or other clinically qualified nutrition professional is not employed full time, a director of food and nutrition services who meets the necessary qualifications will be employed. Under Procedures: 1.) the qualified dietician, or other clinically qualified nutrition professional, will provide guidance and oversight to the Dining Services department for the consistent preparation and service of all regular and therapeutic diets, the training and supervision of all department staff, the purchase of food and supplies for the department and ensuring all practices are in full compliance with current standards of practice and all applicable regulatory requirements.		

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<p>F 0808</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure therapeutic diets are prescribed by the attending physician and may be delegated to a registered or licensed dietitian, to the extent allowed by State law.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 42355</p> <p>Based on observation, interview and document review, the facility failed to ensure therapeutic diet per physician's orders were followed for 1 of 3 residents (R1) reviewed for therapeutic diets.</p> <p>Finding include:</p> <p>R1's quarterly minimum data set (MDS) dated [DATE], indicated R1 had intact cognition with the diagnoses that included chronic kidney disease stage 3b, functional dyspepsia-indigestion, and moderate protein-calorie malnutrition. R1 was on a therapeutic diet and had no weight gain or loss noted. R1 required set up only with eating and oral hygiene.</p> <p>R1's physician orders included the following:</p> <p>-Diet: renal dialysis (2000 milligrams (mg) sodium, 100 grams (GM) protein, 2700 mg potassium, low phosphorous (start date 10/27/23).</p> <p>During a kitchen observation and interview on 5/23/24 at 4:45 p.m. dietary menus were reviewed with cook (C)-B. The menu identified for regular diets the following items would be served for the evening meal: Hawaiian baked ham, seasoned green beans, baked sweet potatoes, corn bread, and sliced pears. The corresponding menu for renal diets included glazed baked pork chops, mashed potato, green beans, dinner roll with margarine, and sliced pears. C-B stated the facility did not have any pork to serve for those diet types and no alternative protein was prepared for replacement. C-B was not able to articulate and/or explain the differences in diet types, he would read and plate what was on each resident's meal ticket which printed out which foods were to be served. (C)-B indicated the dietary manager was the person who was trained on different diet types and would have picked an alternative protein to meet the dietary restrictions, however the facility did not currently have dietary manager. The facility did have a registered dietitian available for questions however, he had not called for further instructions when he realized that he could not make the pork.</p> <p>During an observation on 5/23/24 at 5:20 p.m. R1 sat at the dining room table, a box of condiments sat in front of her that included salt. R1 stated a family member put the box together for her. R1 stated she was not supposed to have salt according to her diet and she rarely used it. R1's dinner tray was set in front of her; R1 received Hawaiian baked ham, mashed potatoes, green beans, dinner roll/margarine, sliced pears. R1 stated she was supposed to be on a renal diet and the ham was not part of the diet. R1 stated she did not ask for an alternative menu item and ate all of foods that were served.</p> <p>During an interview on 5/24/24 at 1:59 p.m., regional director of operations (RDO)-A stated there were diet exchanges for every menu item and it was listed in the kitchen next to the current daily menu. It was her expectation that the ordered diets be followed.</p> <p>Review of the facility's contracted dietary company's policy HCSG policy 8, dated 10/2022, titled Therapeutic Diets, indicated 3. Diets are prepared in accordance with the guidelines in the approved Diet Manual and the individualized plan of care.</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><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 42355</p> <p>Based on observation, interview, and document review the facility failed to ensure safe food storage and kitchen cleanliness to reduce and/or prevent the risk of food borne illness. This had the potential to affect 45 of 45 residents whop obtained their meals from the kitchen.</p> <p>Findings include:</p> <p>During the initial kitchen tour with cook (C)-B on [DATE] at 5:23 p.m., the following was observed:</p> <p>General kitchen area:</p> <p>The kitchen floor was noted to have a black thick dry substance arround the all the legs of prep tables and cabinets. The wall, floor, and piping underneath the dishwasher had adhered dry substances varying in size and color. C-B verified the presence of soiled areas on the floor/base boards and pipes. C-B stated he was unsure when the last time those areas were last cleaned and they should be cleaned. The cabinets that contained clean pans had white subsance and food crumbs. The ice machine had a white thick substance along the bottom of the machine with several towels underneath. C-B was not aware of when the ice machine was maintained and was not sure why the towels were underneath but thought it was because it leaked.</p> <p>Walk-in cooler: ,d+[DATE] pasturized egg flats were observed without a received date or an open date. C-B stated he was not sure when those eggs were received by the supplier and the eggs should be dated. On a shelf was an undated bag of ,d+[DATE] carrots that had liquid inside the bag and several carrots had a black fuzzy substance on them. C-B stated the black substance appeared to be mold and verified the carrots did not have a date on them. C-B through the carrots in the garbage.</p> <p>Walk-in Freezer: on a shelf in a metal pan that contained approximately ,d+[DATE] opened and unopened bags of food that were not labeled with it's contents nor were they dated. C-B confirmed the bags were not labeled or dated and did not know what the food items were inside the bags. C-B indicated ,d+[DATE] of what was in the pan had been there for at least 3 months. C-B stated the items should have been dated and labeled.</p> <p>Dry storage: Directly on the floor next to a shelf was a box of snack bars and a large bag of flour that was one half gone. C-B stated the food items should not have been on the floor, they should be on the shelf.</p> <p>During an observation o [DATE] at 6:00 p.m., in the dining room on a kitchen cart, there was a gray dish pan with ice in it and half gallons of milk, and Juices. The instructions on the juice boxes indicated the juices once opened expired in 7 days. The following juices were more than 7 days old after opening.</p> <p>-thickened orange juice dated ,d+[DATE];</p> <p>-mildly thickened lemon water, dated [DATE];</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>-prune juice, dated [DATE], and</p> <p>-cranberry juice with no open date.</p> <p>During an interview on [DATE] at 9:12 a.m., C-A verified the dates on the juice cartons and the thickened water. C-A was not aware the juices were only good for 7 days after opening. C-A disposed of the expired juices in the garbage.</p> <p>Review of the facility's contracted dietary company's policy HCSG policy 018 dated ,d+[DATE], and titled Food Storage: Dry Goods,</p> <p>indicated: Procedures: 1. All items will be stored on shelves at least 6 inches above the floor.</p> <p>Review of the facility's contracted dietary company's policy HCSG policy 019, dated ,d+[DATE], and titled Food Storage: Cold Food, indicated: Procedures: 5. All food will be stored wrapped or covered in containers, labeled, and dated, and arranged in a manner to prevent cross contamination.</p> <p>Review of the facility's contracted dietary company's policy HCSG policy 021, dated ,d+[DATE], and title Ice, indicated the following:</p> <p>2. The dining services director will coordinate with the maintenance director to ensure the ice machine will be disconnected, cleaned, and sanitized quarterly and as needed, or according to manufacturer guideline.</p> <p>3. The exterior of the ice machine will be cleaned weekly.</p> <p>Review of the facility's contracted dietary company's policy HCSG policy HCSG 027, dated ,d+[DATE], and titled Equipment indicated:</p> <p>1. All equipment will be routinely cleaned and maintained in accordance with manufacturer's direction and training materials.</p> <p>3. All food contact equipment will be cleaned and sanitized after every use.</p> <p>4. All non-food contact equipment will be cleaned and free of debris.</p>		