

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  245619	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  10/11/2024
NAME OF PROVIDER OR SUPPLIER  Saint Therese at Oxbow Lake		STREET ADDRESS, CITY, STATE, ZIP CODE  9751 Regent Avenue North Brooklyn Park, MN 55443	

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 0806</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47083</b></p> <p>Based on observation, interview, and document review, the facility failed to ensure residents with food allergies were not served allergens for 1 out of 3 residents (R1) reviewed for accuracy of diets.</p> <p>Findings include:</p> <p>R1's admission Minimum Data Set (MDS) dated [DATE] indicated R1 had diagnoses of hip and knee replacement.</p> <p>R1's care plan dated 9/18/24 indicated R1 had an allergy to cinnamon.</p> <p>R1's Breakfast meal ticket dated 10/10/24 indicated Allergens: cinnamon, bread choice: cinnamon raisin bread. The diet ticket also indicated: No cinnamon.</p> <p>On 10/9/24 at 4:03 p.m., R1 stated she frequently received items containing cinnamon, which she was allergic to. She was served a snickerdoodle cookie for lunch earlier on 10/9/24. She only ate one bite of the cookie. She was unaware the cookie contained cinnamon until she ate a bite of it. Her reaction to cinnamon was tongue swelling.</p> <p>On 10/10/24 at 8:56 a.m., R1 was observed to have breakfast served to her room, containing bacon, eggs, fried potatoes, with two pieces of toast over the top. The toast visibly had raisins. The tray lacked a meal ticket. R1 did not eat the food that was served to her. The kitchen was notified.</p> <p>On 10/10/24 at 9:04 a.m., the culinary director (CD) stated the toast contained cinnamon. The dietary aide (DA) started the plate and the nursing assistant (NA) finished it. The CD removed the plate and offered to make a new breakfast plate for R1.</p> <p>On 10/10/24 at 9:34 a.m., the director of nursing (DON) stated she was aware R1 was served toast containing cinnamon.</p> <p>On 10/10/24 at 9:48 a.m., DA-A stated she was preparing the toast for R1. She was aware what diet and allergies R1 required by the meal ticket. She walked away from the toaster, and when she returned NA-A had taken the tray and the toast.</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 0806</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 10/10/24 at 10:09 a.m., NA-A stated she finished making the toast for R1 and delivered the breakfast tray. Meal tickets noted residents' diets, but she was not aware if they indicated food allergies. She was not sure where food allergies were listed for residents.</p> <p>On 10/10/24 at 10:30 a.m., the CD stated allergies were listed on the meal tickets. Residents were able to choose their meals on an electronic menu system, which contained a safeguard system to deter them from choosing items they were allergic to. R1 selected the cinnamon raisin bread, and the system did not catch this. Staff were also responsible to catch/review for allergies prior to serving the residents' food. There was cinnamon in the snickerdoodle cookies served for lunch on 10/9/24. R1 should not have been served the cookie containing cinnamon.</p> <p>On 10/10/24 at 2:06 p.m., the administrator stated the facility lacked a policy regarding food allergies. The facility was not made aware R1's food allergy upon admission, but became aware of it at her initial care conference and her medical chart was updated at that time, on 9/18/24.</p> <p>On 10/10/24 at 2:42 p.m., nurse practitioner (NP)-A stated it was concerning for R1 to be served food she was known to have an allergy to. A reaction of tongue swelling could lead to a respiratory reaction. She would expect further conversation between the facility staff and R1 if R1 was opting to choose to eat food products containing a known allergen.</p> <p>A facility document Menu for the Week of October 6 through 12, 2024, indicated a snickerdoodle cookie was on the menu for lunch on 10/9/24.</p>		