

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  265382	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/17/2025
NAME OF PROVIDER OR SUPPLIER  Memory Lane of Dexter		STREET ADDRESS, CITY, STATE, ZIP CODE  415 S Catalpa Street Dexter, MO 63841	

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 0758</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47678</b></p> <p>Based on interview and record review, the facility failed to attempt a gradual dose reduction (GDR) for four residents (Residents #2, #3, #30, and #33) out of five sampled residents. The facility's census was 64.</p> <p>Review of the facility's policy titled, Tapering Medications and Gradual Dose Reduction, revised July 2022, showed:</p> <ul style="list-style-type: none"> <li>- After medications are ordered for a resident, the staff and practitioner shall seek an appropriate dose and duration for each medication that also minimizes the risk of adverse consequences;</li> <li>- Residents who use psychotropic (medications that affect the mind, emotions, and behavior) medications shall receive gradual dose reductions and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs;</li> <li>- The staff and practitioner will consider tapering of medications as one approach to finding an optimal dose or determining whether continued use of a medication is benefiting the resident;</li> <li>- The physician will review periodically whether current medications are still necessary in their current doses. For example, whether an individual's conditions or risk factors are sufficiently prominent or enduring that they require medication therapy to continue in the current dose, or whether those conditions and risks could potentially be equally well managed or controlled without certain medications, or with a lower dose;</li> <li>- Residents who use psychotropic medications shall receive gradual dose reductions, unless clinically contraindicated, in an effort to discontinue the use of such drugs. Pertinent behavioral interventions (non-pharmacological attempts to influence an individual's behavior, including environmental alterations and staff approaches to care) will also be attempted;</li> <li>- Within the first year after a resident is admitted on a psychotropic medication or after the resident has been started on a psychotropic medication, the staff and practitioner shall attempt a GDR in two separate quarters (with at least one month between the attempts), unless clinically contraindicated. After the first year, the facility shall attempt a GDR at least annually, unless clinically contraindicated;</li> </ul> <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 0758</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>- For any individual who is receiving a psychotropic medication to treat a psychiatric disorder other than behavioral symptoms related to dementia (for example, schizophrenia, bipolar mania, or depression with psychotic features), the GDR may be considered contraindicated, if: the continued use is in accordance with relevant current standards of practice and the physician has documented the clinical rationale for why any attempted dose reduction would be likely to impair the resident's function or cause psychiatric instability by exacerbating an underlying psychiatric disorder; or the resident's target symptoms returned or worsened after the most recent attempt at a GDR within the facility and the physician has documented the clinical rationale for why any additional attempted dose reduction at that time would be likely to impair the resident's function or cause psychiatric instability by exacerbating an underlying medical or psychiatric disorder.</p> <p>1. Review of Resident #2's medical record showed:</p> <p>- admitted [DATE];</p> <p>- Diagnoses of unspecified dementia (dementia without a specific cause, a person's mild cognitive impairment has yet to be diagnosed as a specific type of dementia), psychotic disturbance (a mental disorder characterized by a disconnection from reality), psychosis (a collection of symptoms that affect the mind, where there has been some loss of contact with reality), Alzheimer's disease (a progressive disease that destroys memory and mental function) and major depressive disorder (a mental illness that causes a persistent low mood and loss of interest in activities);</p> <p>- An order for quetiapine (an antipsychotic medication that treats symptoms of psychosis, such as hallucinations and delusions) 25 milligrams (mg) by mouth at bedtime daily, dated 04/01/24;</p> <p>- An order for mirtazapine (an antidepressant medication) 15 mg by mouth at bedtime daily for anxiety disorder, dated 03/23/24;</p> <p>- No documentation of attempted GDRs for quetiapine, or mirtazapine;</p> <p>- No documentation of contraindications of medication adjustments for quetiapine, or mirtazapine.</p> <p>2. Review of Resident #3's medical record showed:</p> <p>- admitted [DATE];</p> <p>- Diagnoses of unspecified dementia, psychosis, anxiety (intense, excessive, and persistent worry and fear about everyday situations), and cognitive communication deficit (difficulty with communication caused by impairment in cognitive process);</p> <p>- An order for risperidone (an antipsychotic medication) 0.25 mg, one tablet by mouth at bedtime, dated 04/27/23;</p> <p>- No documentation of attempted GDRs for risperidone;</p> <p>- No documentation of contraindications of medication adjustments for risperidone.</p> <p>3. Review of Resident #30's medical record showed:</p> <p>(continued on next page)</p>		

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<p>F 0758</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<ul style="list-style-type: none"> <li>- admitted [DATE];</li> <li>- Diagnoses of Alzheimer's disease, repeated falls, cognitive communication deficit, and hallucinations (seeing, hearing, tasting, smelling, or feeling something that isn't there);</li> <li>- An order for quetiapine 25 mg daily in the evening, dated 03/07/24;</li> <li>- No documentation of attempted GDRs for quetiapine;</li> <li>- No documentation of contraindications of medication adjustments for quetiapine.</li> </ul> <p>4. Review of Resident #33's medical record showed:</p> <ul style="list-style-type: none"> <li>- admitted [DATE];</li> <li>- Diagnoses of unspecified psychosis, Alzheimer's disease, and unspecified dementia;</li> <li>- An order for quetiapine (an antipsychotic medication) 100 mg, give one tablet by mouth at bedtime, dated 01/10/24;</li> <li>- An order for quetiapine (an antipsychotic medication) 25 mg, give one tablet by mouth two times a day, dated 10/09/24;</li> <li>- No documentation of attempted GDRs for quetiapine;</li> <li>- No documentation of contraindications of medication adjustments for quetiapine.</li> </ul> <p>During an interview on 01/23/25 at 11:45 A.M., Pharmacist E said he/she initiates GDRs on medications quarterly, last done in October 2024. He/she said they are getting ready to start on the January GDRs. Pharmacist E said he/she works closely with the facility psychiatrist when it comes to the dosing of the medication.</p> <p>During an interview on 01/17/25 at 6:30 P.M., the Administrator and the Director of Nursing said they both expected GDRs to be done for all residents on any psychotropic medications. The GDRs should be completed per the facility's policy.</p> <p>49879</p>		

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<p>F 0759</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure medication error rates are not 5 percent or greater.</p> <p>47678</p> <p>Based on observation, interview, and record review, the facility failed to maintain an error rate of less than five percent (%) during medication administration. There were 29 opportunities with two errors made, for an error rate of 6.9%, which affected two residents (Resident #30 and #267) out of two sampled residents. The facility's census was 64.</p> <p>Review of the facility's policy titled, Insulin Administration, revised September 2014, showed:</p> <ul style="list-style-type: none"> <li>- The type of insulin, dosage requirements, strength, and method of administration must be verified before administration;</li> <li>- The nursing staff will have access to specific instructions (from the manufacturer if appropriate) on all forms of insulin delivery systems prior to their use.</li> </ul> <p>Review of the lispro KwikPen (insulin in a pen-type device) manufacturer instructions for use, revised July 2023, showed:</p> <ul style="list-style-type: none"> <li>- Priming the pen means removing the air from the needle and cartridge that may collect during normal use and ensures that the pen is working correctly;</li> <li>- Not priming before each injection may result in too much or too little insulin;</li> <li>- Turn the dose knob to select two units;</li> <li>- Hold the pen with the needle pointing up, tap the cartridge holder gently to collect air bubbles at the top;</li> <li>- With the needle pointing up, push the dose knob until it stops and zero is seen in the dose window, hold and count to five slowly;</li> <li>- There should be insulin at the tip of the needle, if not, repeat no more than four times.</li> </ul> <p>Review of the Fiasp Flex Touch Pen (insulin in a pen-type device) instructions, revised July 2023, showed:</p> <ul style="list-style-type: none"> <li>- To prime the pen, turn the dose selector to select two units;</li> <li>- Hold the pen with the needle pointing up;</li> <li>- Tap the cartridge gently with your finger a few times to make any air bubbles collect at the top of the cartridge;</li> <li>- Keep the needle pointing upwards, press the push-button all the way in;</li> <li>- The dose selector returns to zero;</li> </ul> <p>(continued on next page)</p>		

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<p>F 0759</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<ul style="list-style-type: none"> <li>- A drop of insulin should appear at the needle tip. If not, change the needle and repeat the procedure no more than six times;</li> <li>- Select your dose;</li> <li>- Give injection.</li> </ul> <p>1. Review of Resident #30's Physician's Order Sheet (POS), dated January 2025, showed:</p> <ul style="list-style-type: none"> <li>- An order for insulin lispro per sliding scale (progressive increase in the pre-meal or nighttime insulin dose based on pre-defined blood glucose ranges) for a blood sugar of 251-300, give seven units, dated 05/07/24.</li> </ul> <p>Observation of the resident's medication administration on 01/15/25 at 11:29 A.M. showed:</p> <ul style="list-style-type: none"> <li>- Certified Medication Technician (CMT) D administered insulin lispro seven units subcutaneously (an injection just beneath the skin) to the resident per sliding scale for a blood sugar of 280;</li> <li>- CMT D failed to prime the insulin pen prior to the administration of the insulin.</li> </ul> <p>2. Review of Resident #267's POS, dated January 2025, showed:</p> <ul style="list-style-type: none"> <li>- An order for Fiasp, inject per sliding scale for a blood sugar of 301-350, give eight units, dated 12/19/2024.</li> </ul> <p>Observation of the resident's medication administration on 01/15/25 at 11:10 A.M. showed:</p> <ul style="list-style-type: none"> <li>- CMT D administered Fiasp eight units subcutaneously to the resident per sliding scale for a blood sugar of 311;</li> <li>- CMT D failed to prime the Fiasp pen prior to the administration of the insulin.</li> </ul> <p>During an interview on 01/15/25 at 11:45 A.M., CMT D said he/she was told to prime the pen when first opened, not with each injection.</p> <p>During an interview on 01/17/25 at 8:07 A.M., the Administrator and the Director of Nursing said they would expect staff to prime the insulin pen prior to each injection.</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> 33352</p> <p>Based on observation, interview, and record review, the facility failed to store and distribute food under sanitary conditions, increasing the risk of cross-contamination and food-borne illness. These practices had the potential to affect all residents who are served food from the kitchen. The facility's census was 64.</p> <p>Review of the facility's policy titled, Refrigerators and Freezers, revised [DATE], showed:</p> <ul style="list-style-type: none"> <li>- This facility will ensure safe refrigerator and freezer maintenance, temperatures, and sanitation, and will observe food expiration guidelines;</li> <li>- Supervisors are responsible for ensuring food items in pantry, refrigerators, and freezers are not past use by or expiration dates. Supervisors should contact vendors or manufacturers when expiration dates are in question or to decipher codes on packaging.</li> </ul> <p>Review of the facility's policy titled, Food Receiving and Storage, revised [DATE], showed:</p> <ul style="list-style-type: none"> <li>- Foods shall be received and stored in a manner that complies with safe food handling practices;</li> <li>- Food services, or other designated staff, maintain clean and temperature/humidity-appropriate food storage areas at all times;</li> <li>- Dry foods and goods are handled and stored in a manner that maintains the integrity of the packaging until they are ready to use;</li> <li>- Dry foods that are stored in bins are removed from original packaging, labeled and dated (use by date);</li> <li>- Refrigerated foods are labeled, dated and monitored so they are used by their use by date, frozen, or discarded.</li> </ul> <p>Review of the facility's Daily Cleaning Schedule for the kitchen, dated [DATE], showed floors are to swept and mopped daily by the afternoon staff.</p> <p>Observation on [DATE] at 9:15 A.M. of the dry goods storage room showed:</p> <ul style="list-style-type: none"> <li>- Four 46 ounce (oz) unopened containers of prune juice with an expiration date of [DATE];</li> <li>- Two 16 oz unopened containers of beef base with an expiration date of [DATE];</li> <li>- Three 28 oz unopened packages of vanilla instant pudding and pie filling mix and one, opened on [DATE], all with an expiration date of [DATE];</li> </ul> <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>- Nine 28 oz unopened packages of chocolate instant pudding and pie filling mix and one, opened on [DATE], all with an expiration date of [DATE].</p> <p>Observation on [DATE] at 9:15 A.M. and [DATE] at 10:45 A.M. of the dry goods storage room showed:</p> <ul style="list-style-type: none"> <li>- Onion peelings and a 1 inch ( ) x 2 puddle of a brown sticky substance under the right rear plastic shelving unit;</li> <li>- A 3 x 3 area of a light colored sticky residue on the floor in front of the right rear plastic shelving unit;</li> <li>- A cardboard box of graham cracker crumbs, dated [DATE], with the lid opened and the inner plastic bag opened and unsealed;</li> <li>- A cardboard box of puree bread mix, dated [DATE], with the lid opened and the inner plastic bag opened and unsealed;</li> <li>- A cardboard box of panko bread crumbs, dated [DATE], with the lid opened and the inner plastic bag opened and unsealed;</li> <li>- Food crumbs and debris in three plastic storage bins containing brown gravy mix, chicken gravy mix, and biscuit gravy mix.</li> </ul> <p>Observation on [DATE] at 10:45 A.M. of the kitchen showed:</p> <ul style="list-style-type: none"> <li>- A gallon of chocolate milk, half full, with an expiration date of [DATE] in the refrigerator on the right side of the kitchen;</li> <li>- A five pound (lb) container of cottage cheese, opened on [DATE] with a best by date of [DATE], in the refrigerator on the left side of the kitchen.</li> </ul> <p>Observation on [DATE] at 10:50 A.M. of the dry goods storage room showed:</p> <ul style="list-style-type: none"> <li>- A 25 lb box of powdered sugar, dated [DATE], with the lid opened and the inner plastic bag opened and unsealed;</li> <li>- A 25 lb box of long grain rice, dated ,d+[DATE] with no year, with the lid opened and the inner plastic bag opened and unsealed;</li> <li>- A 25 lb bag of yellow self rising cornmeal mix, dated [DATE], opened, inside a plastic tote with the lid on, and the outside of the tote dated [DATE];</li> <li>- A 25 lb bag of hushpuppy mix, delivered date [DATE], expiration date of [DATE], opened, inside a plastic tote with the lid on;</li> <li>- A two gallon plastic resealable bag of rotini pasta, opened [DATE], unsealed with two drips of dark colored liquid on the outside of the bag.</li> </ul> <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 interview on [DATE] at 10:15 a.m., the Dietary Manager (DM) said the expired foods would be thrown out immediately. He/she said the sticky residue on the floor of the dry goods storage room looked like syrup and the dietary staff would clean it up.</p> <p>During an interview on [DATE] at 11:20 A.M., the DM said the dietary staff was supposed to have cleaned the floor in the dry goods storage room, but obviously it wasn't done. He/she took over as the DM in [DATE] and inherited some of the expired food and they hadn't been using it, but it would be discarded immediately.</p> <p>During an interview on [DATE] at 6:20 P.M., the Administrator said she would expect expired food items to be thrown away on or at their expiration dates.</p> <p>49879</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>33352</p> <p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>Based on observation, interview, and record review, the facility failed to maintain an effective pest control program. This had the potential to affect all residents in the facility. The facility's census was 64.</p> <p>Review of the facility's policy titled, Pest Control, revised May 2008, showed:</p> <ul style="list-style-type: none"> <li>- Our facility shall maintain an effective pest control program;</li> <li>- This facility maintains an on-going pest control program to ensure that the building is kept free of insects.</li> </ul> <p>Observation on 01/15/25 at 9:15 A.M. of the dry goods storage room showed:</p> <ul style="list-style-type: none"> <li>- Multiple gnats crawling on the floor between the kitchen and dry goods storage room;</li> <li>- Numerous gnats flying around the dry goods storage room and crawling on the floor;</li> <li>- Numerous gnats flying above onions stored in an open plastic bin and over a 1 inch ( ) x 2 puddle of a brown sticky substance under the right rear plastic shelving unit and a 3 x 3 area of a light colored sticky residue on the floor in front of the right rear plastic shelving unit;</li> <li>- Three gnats crawling on plastic resealable bags of spaghetti and rotini pasta noodles.</li> </ul> <p>Observation on 01/17/25 at 10:50 A.M. of the dry goods storage room showed:</p> <ul style="list-style-type: none"> <li>- A gnat on a plastic bag containing angel food cake, dated 12/21/24;</li> <li>- A 25 pound (lb) box of powdered sugar, dated 9/8/23, with the lid opened and the inner plastic bag opened and unsealed, with two gnats flying around it;</li> <li>- Numerous dead gnats in the floor in front of a crate holding a plastic tote containing a 25 lb bag of hushpuppy mix;</li> <li>- A gnat crawling on the plastic wrapper of a loaf of sandwich bread on a shelf next to the door;</li> <li>- Two live gnats crawling on the floor and numerous dead gnats on the floor in front of the open plastic bin of onions;</li> <li>- A gnat crawling on a cardboard tray containing seven 50 oz cans of tomato soup;</li> <li>- A gnat crawling on a cardboard tray containing four 7.25 oz cans of tomato soup and three 7.25 oz cans of chicken noodle soup.</li> </ul> <p>(continued on next page)</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 01/15/25 at 10:15 a.m., the Dietary Manager (DM) said he/she thought the gnats were coming from the floor drain and they had previously poured a mixture of cider vinegar and dishwashing liquid down the drain to try to get rid of them.</p> <p>During an interview on 01/17/25 at 6:20 P.M., the Administrator said she would expect the kitchen and food storage areas to be free from pests. She said the pest control company came to the facility yesterday to spray for the gnats.</p> <p>49879</p>		