

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  285141	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  03/05/2026
NAME OF PROVIDER OR SUPPLIER  Adept Nursing & Rehab of Sutherland		STREET ADDRESS, CITY, STATE, ZIP CODE  333 Maple Street Sutherland, NE 69165	
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 0689</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Some</p>	<p>Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Licensure Reference Number 175 NAC 12-006.09(I) Based on observations, interviews, and record review; the facility failed to ensure water temperatures in resident restroom sinks and a resident accessible dining room sink were 120 degrees or below, placing 6 (Residents 9, 15, 26, 29, 38, and 40) of 6 sampled residents at risk for burns. The facility census was 42. Findings Are: The facility was notified on 3/2/2026 at 2:30 PM of an Immediate Jeopardy (IJ) which began on 4/15/2025. The IJ was removed on 3/2/2026, as confirmed by surveyor onsite verification. A record review of facility policy Safe Water Temperatures with a revision date of 4/2/2025 revealed water temperatures will be set to a temperature of no more than 120 degrees Fahrenheit (F). Maintenance staff will check water heater temperature controls and the temperatures of tap water in all hot water circuits weekly and as needed. A record review of a Burn Exposure Chart on the antiscald.com website dated 2026, revealed a 2nd degree burn can occur within 2 minutes of exposure to a water temperature of 124 degrees F, within 17 seconds of exposure to a water temperature of 131 degrees F, and within 3 seconds of exposure to a water temperature of 140 degrees F. A.A record review of Resident 15's admission Record revealed the resident was admitted to the facility on [DATE] with a primary diagnosis of Hemiplegia (total or partial paralysis on one side of the body that results from disease or injury to the motor centers of the brain). The resident resided in the facility's Special Care Unit (SCU). A record review of Resident 15's Minimum Data Set (MDS, a federally mandated comprehensive assessment tool used to determine a resident's functional capabilities and helps nursing home staff identify health problems) dated 2/10/2026 revealed a Brief Interview for Mental Status (BIMS, a brief screener that aids in detecting cognitive impairment) score of 3/15, which indicated the resident had severe cognitive impairment. The resident utilized a wheelchair for mobility and was independent with wheeling self at least 150 feet. An observation on 3/2/2026 at 1:46 PM in Resident 15's room (room [ROOM NUMBER]), revealed the bathroom sink water temperature was 132.1 degrees F. An interview on 3/2/2026 at 1:42 PM with Nurse Aide (NA)-A revealed Resident 15 was independently mobile and did go into their bathroom at times without staff assistance. An interview and observation on 3/2/2026 at 1:57 PM with Maintenance revealed they checked the water temperatures in random rooms throughout the facility Monday through Friday each week. Maintenance was observed turning on the water in room [ROOM NUMBER]'s bathroom sink and obtaining a temperature reading of 132 degrees F with their temperature gauge. An observation on 3/3/2026 at 11:24 AM revealed Resident 15 wheeling self from the dining room and down the hallway independently. B.A record review of Resident 26's admission Record revealed the resident was admitted to the facility on [DATE] with a primary diagnosis of dementia (a usually progressive condition marked by the development of multiple cognitive deficits (such as memory impairment, aphasia, and the inability to plan and initiate complex behavior). The resident resided in the facility's SCU. A record review of Resident 26's Quarterly MDS dated [DATE] revealed the resident had a BIMS score of 0/15, indicating the resident had severe cognitive impairment. The resident utilized a walker for ambulation, required supervision with toileting hygiene, and was able to ambulate at least 150 feet independently. A record review of Resident 26's (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 0689</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Some</p>	<p>undated Care Plan revealed the resident required set up assistance with hygiene and was independent with toileting and ambulation. An observation on 3/2/26 at 1:39 PM revealed the bathroom sink water temperature in Resident 26's room (room [ROOM NUMBER]) was 137.8 degrees F. An interview on 3/2/26 at 1:42 PM with NA-A revealed Resident 26 was independently ambulatory and did go into their bathroom independently at times. An observation on 3/2/26 at 2:07 PM revealed Maintenance turning on the water in room [ROOM NUMBER]'s bathroom sink and obtaining a temperature reading of 137.4 degrees F with their temperature gauge. C.A record review of Resident 29's admission record revealed the resident was admitted to the facility on [DATE] with a primary diagnosis of dementia. The resident resided in the facility's SCU. A record review of Resident 29's admission MDS dated [DATE] revealed a BIMS score of 0/15, indicating the resident had severe cognitive impairment. The resident utilized a walker for mobility and required supervision for walking up to 50 feet. A record review of Resident 29's undated Care Plan revealed the resident required supervision for ambulation and toileting. An observation on 3/2/2026 at 1:35 PM revealed Resident 29 resided in room [ROOM NUMBER] and their bathroom sink water temperature was 136 degrees F. An interview on 3/2/26 at 1:42 PM with NA-A revealed Resident 29 was independently mobile and did go into their bathroom independently at times. D.A record review of Resident 9's admission Record revealed the resident was admitted to the facility on [DATE] with a primary diagnosis of dementia. The resident resided in the facility's SCU in room [ROOM NUMBER]. A record review of Resident 9's Quarterly MDS dated [DATE] revealed a BIMS score of 0/15, which indicated the resident had severe cognitive impairment. The resident did not utilize any mobility devices, required supervision with toileting hygiene, and was able to walk at least 150 feet independently. An observation on 3/2/2026 at 1:32 PM revealed Resident 9's bathroom sink water temperature was 133 degrees F. An interview on 3/2/26 at 1:42 PM with NA-A revealed Resident 9 was independently ambulatory and frequently wandered throughout the SCU. An observation on 3/2/26 at 2:04 PM revealed Maintenance turning on the water in room [ROOM NUMBER]'s bathroom sink and obtaining a temperature reading of 133.1 degrees F with their temperature gauge. E.A record review of Resident 40's admission Record revealed the resident was admitted to the facility on [DATE] with a primary diagnosis of Alzheimer's disease (a degenerative brain disease of unknown cause that usually starts in late middle age or in old age, that results in progressive memory loss, impaired thinking, disorientation, and changes in personality and mood). The resident resided in the facility's SCU in room [ROOM NUMBER]. A record review of Resident 40's Annual MDS dated [DATE] revealed a BIMS score of 10/15, which indicated the resident had moderate cognitive impairment. The resident utilized a wheelchair for mobility and was independent with wheeling self at least 150 feet. A record review of Resident 40's undated Care Plan revealed the resident required substantial assistance with toileting and supervision for personal hygiene. An observation on 3/2/2026 at 1:32 PM revealed Resident 40's bathroom sink water temperature was 133 degrees F. An interview on 3/2/26 at 1:42 PM with NA-A revealed Resident 40 was independently mobile and did go into their bathroom independently at times. An observation on 3/2/26 at 2:04 PM revealed Maintenance turning on the water in room [ROOM NUMBER]'s bathroom sink and obtaining a temperature reading of 133.1 degrees F with their temperature gauge. F.A record review of Resident 38's admission Record revealed the resident was admitted to the facility on [DATE] with a primary diagnosis of degeneration of nervous system due to alcohol. The resident resided in the facility's SCU in room [ROOM NUMBER]. A record review of Resident 38's Quarterly MDS dated [DATE] revealed a BIMS score of 8/15, which indicated the resident had moderate cognitive impairment. The resident was independent with toileting, required set up/clean up assistance with personal hygiene, and was able to ambulate at least 150 feet independently. An observation on 3/2/2026 at 1:50 PM revealed Resident 38's bathroom sink water temperature was 121 degrees F. An interview on 3/2/26 at 1:42 PM with NA-A revealed Resident 38 was independently ambulatory and did go into their bathroom without staff assistance. An observation on 3/2/26 at 1:59 PM revealed Maintenance turning on the water in room [ROOM NUMBER]'s bathroom sink and (continued on next page)</p>		

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<p>F 0689</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Some</p>	<p>(F):-In SCU Dining room the temperature was 124.4 degrees F on 7/8/2025, 125 degrees F on 7/9/2025, 120.8 degrees F on 7/10/2025, and 122.2 degrees F on 7/11/2025.-In SCU room [ROOM NUMBER], 105, 106, 107, and 108 the temperature was 129 degrees F on 7/8/2025, 127 degrees F on 7/9/2025, 120.1 degrees F on 7/10/2025, and 124 degrees F on 7/11/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of July 14th -July 18th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 121.9 degrees F on 7/14/2025, 123.9 degrees F on 7/16/2025, 131.6 degrees F on 7/17/2025, and 131.8 degrees F on 7/18/2025.-In SCU room [ROOM NUMBER],107, 106, 110, and 108 the temperature was 124.6 degrees F on 7/14/2025, 122.7 degrees F on 7/16/2025, 131.1 degrees F on 7/17/2025, and 128.5 degrees F on 7/18/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of July 21st -July 25th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 131.7 degrees F on 7/21/2025, 130.3 degrees F on 7/22/2025, 124.3 degrees F on 7/23/2025, 132.1 degrees F on 7/24/2025, and 131.2 degrees F on 7/25/2025.-In SCU room [ROOM NUMBER], 108, 107, 106, and 105 the temperature was 128.9 degrees F on 7/21/2025, 130.3 degrees F on 7/22/2025, 122.6 degrees F on 7/23/2025, 129 degrees F on 7/24/2025, and 130.3 degrees F on 7/25/2025.A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of July 28th -August 1st, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 124.3 degrees F on 7/28/2025, 132.1 degrees F on 7/29/2025, 126.3 degrees F on 7/31/2025, 126.3 degrees F on 8/1/2025.-In SCU Rooms 112, 110, 111, and 105 the temperature was 130.2 degrees F on 7/28/2025, 132 degrees F on 7/29/2025, 129.3 degrees F on 7/31/2025, and 129.3 degrees F on 8/1/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of August 4th -August 8th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 126.5 degrees F on 8/4/2025, 139.6 degrees F on 8/5/2025, 130.7 degrees F on 8/7/2025, and 137.7 degrees F on 8/8/2025.-In SCU Rooms 112, 105, 106, and 107 the temperature was 130.1 degrees F on 8/4/2025, 139.4 degrees F on 8/5/2025, 138.1 degrees F on 8/7/2025, and 139.4 degrees F on 8/8/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of August 11th -August 15th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 127.3 degrees F on 8/11/2025, 135.4 degrees F on 8/12/2025, 135.4 degrees F on 8/13/2025, 138.1 degrees F on 8/14/2025, and 138.9 degrees F on 8/15/2025.-In SCU Rooms 111, 110, 108, 107, and 106 the temperature was 137.4 degrees F on 8/11/2025, 138.1 degrees F on 8/12/2025, 137.1 degrees F on 8/13/2025, 135.4 degrees F on 8/14/2025, and 135.2 degrees F on 8/15/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of August 18th -August 22nd, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 136.6 degrees F on 8/18/2026, 133.8 degrees F on 8/19/2025, 135.4 degrees F on 8/20/2025, 131.5 degrees F on 8/21/2025, and 134.1 degrees F on 8/22/2025.-In SCU room [ROOM NUMBER], 105, 110, 106, and 107 the temperature was 138.5 degrees F on 8/18/2025, 138.7 degrees F on 8/19/2025, 137.5 degrees F on 8/20/2025, 135.7 degrees F on 8/21/2025, and 135.6 degrees F on 8/22/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of September 1st -September 5th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 123.1 degrees F on 9/1/2025, 126.8 degrees F on 9/2/2025, 134.2 degrees F on 9/3/2025, 131 degrees F on 9/4/2025, 135.6 degrees F on 9/5/2025.-In SCU room [ROOM NUMBER], 110, 111, 112, and 107 the temperature was 129.3 degrees F on 9/1/2025, 134.3 degrees F on 9/2/2025, 135 degrees F on 9/3/2025, 135.8 degrees F on 9/4/2025, and 126.7 degrees F on 9/5/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of September 8th -September 12th, 2025, revealed the water temperature was greater (continued on next page)</p>		

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<p>F 0689</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Some</p>	<p>than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 130.8 degrees F on 9/8/2025, 136.4 degrees F on 9/9/2025, and 133.3 degrees F on 9/10/2025.-In SCU room [ROOM NUMBER], 105, 106 the temperature was 130.6 degrees F on 9/8/2025, 132.7 degrees F on 9/9/2025, and 136.5 degrees F on 9/10/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of September 22nd -September 26th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 126.4 degrees F on 9/22/2025, 122.2 degrees F on 9/23/2025, 130.4 degrees F on 9/24/2025, 132.6 degrees F on 9/25/2025, and 130.1 degrees F on 9/26/2025.-In SCU room [ROOM NUMBER], 105, 106, 107, and 108 the temperature was 135.4 degrees F on 9/22/2025, 140.4 degrees F on 9/23/2025, 136.2 degrees F on 9/24/2025, 136.8 degrees F on 9/25/2025, and 135.7 degrees F on 9/26/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of September 29th -October 3rd, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 139.8 degrees F on 9/29/2025, 132.6 degrees F on 10/1/2025, 128.9 degrees F on 10/2/2025, and 133.1 degrees F on 10/3/2025.-In SCU room [ROOM NUMBER], 111, 110, and 108 the temperature was 138.7 degrees F on 9/29/2025, 135.6 degrees F on 10/1/2025, 138 degrees F on 10/2/2025, and 134.8 degrees F on 10/3/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of October 6th -October 10th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 121.6 degrees F on 10/6/2025, 124.3 degrees F on 10/7/2025, 130.1 degrees F on 10/8/2025, 126.0 degrees F on 10/9/2025, and 123.4 degrees F on 10/10/2025.-In SCU room [ROOM NUMBER], 105, 106, 107, and 108 the temperature was 136.9 degrees F on 10/6/2025, 134.5 degrees F on 10/7/2025, 134.6 degrees F on 10/8/2025, 132.6 degrees F on 10/9/2025, and 126.4 degrees F on 10/10/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of October 20th -October 23rd, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 131.2 degrees F on 10/20/2025, 133.3 degrees F on 10/21/2025, 136.1 degrees F on 10/22/2025, and 135.4 degrees F on 10/23/2025.-In SCU room [ROOM NUMBER], 112, 111, and 106 the temperature was 131 degrees F on 10/20/2025, 125.1 degrees F on 10/21/2025, 131.6 degrees F on 10/22/2025, 124.6 degrees F on 10/23/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of October 27th -October 31st, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 128.6 degrees F on 10/27/2025, 126.1 degrees F on 10/28/2025, 130.6 degrees F on 10/29/2025, 131 degrees F on 10/30/2025, and 129.8 degrees F on 10/31/2025.-In SCU room [ROOM NUMBER], 111, 110, 108, and 107 the temperature was 126.1 degrees F on 10/27/2025, 130.6 degrees F on 10/28/2025, 129.7 degrees F on 10/29/2025, 130.6 degrees F on 10/30/2025, and 129.6 degrees F on 10/31/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of November 3rd -November 7th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 122.6 degrees F on 11/3/2025, 120.6 degrees F on 11/4/2025, 122.4 degrees F on 11/5/2025, 125.1 degrees F on 11/6/2025, and 128.7 degrees F on 11/7/2025.-In SCU room [ROOM NUMBER], 107, 108, 105, and 110 the temperature was 133 degrees F on 11/3/2025, 130.7 degrees F on 11/4/2025, 137.2 degrees F on 11/5/2025, 131.4 degrees F on 11/6/2025, and 129.6 degrees F on 11/7/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of November 10th -November 14th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 135.1 degrees F on 11/10/2025, 132.2 degrees F on 11/11/2025, 131.5 degrees F on 11/12/2025, 135.4 degrees F on 11/13/2025, and 133 degrees F on 11/14/2025.-In SCU room [ROOM NUMBER], 112, 106, 107, 108 the temperature was 134.6 degrees F on 11/10/2025, 135.6 degrees F on 11/11/2025, 133.7 degrees F on 11/12/2025, 130.4 degrees F on 11/13/2025, and 137.6 degrees F on 11/14/2025. (continued on next page)</p>		

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<p>F 0689</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Some</p>	<p>on 11/14/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of November 17th -November 21st, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 136.4 degrees F on 11/17/2025, 133 degrees F on 11/18/2025, 135.4 degrees F on 11/19/2025, 130.6 degrees F on 11/20/2025, 133.4 degrees F on 11/21/2025.-In SCU room [ROOM NUMBER], 105, 111, 107, and 108 the temperature was 133.3 degrees F on 11/17/2025, 129.1 degrees F on 11/18/2025, 136.5 degrees F on 11/19/2025, 127.4 degrees F on 11/20/2025, and 133.3 degrees F on 11/21/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of December 8th -December 12th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 132.6 degrees F on 12/8/2025 and 127.1 degrees F on 12/9/2025.-In SCU the temperature was 130.1 degrees F on 12/8/2025 and 132.3 degrees F on 12/9/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of December 22nd -December 26th, 2025, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 134.6 degrees F on 12/22/2025, 132.1 degrees F on 12/23/2025, 131.6 degrees F on 12/24/2025, and 129.1 degrees F on 12/26/2025.-In SCU 105, 106, 107, and 108 the temperature was 128.1 degrees F on 12/22/2025, 130.1 degrees F on 12/23/2025, 129.6 degrees F on 12/24/2025, and 131.6 degrees F on 12/26/2025. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of December 29th, 2025 -January 2nd, 2026, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 129.6 degrees F on 12/29/2025, 132 degrees F on 12/30/2025, 126.3 degrees F on 12/31/2025, 127.6 degrees F on 1/1/2026, and 130.1 degrees F on 1/2/2026.-In SCU 112, 111, 110, and 108 the temperature was 130.1 degrees F on 12/29/2025, 128.7 degrees F on 1/30/2025, 130 degrees F on 12/31/2025, 125.4 degrees F on 1/1/2026, and 125.1 degrees F on 1/2/2026. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of January 5th -January 9th, 2026, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 134.4 degrees F on 1/5/2026, 136.1 degrees F on 1/6/2026, 132.1 degrees F on 1/7/2026, 129.6 degrees F on 1/8/2026, and 131.6 degrees F on 1/9/2026.-In SCU 105, 106, 107, 108, and 110 the temperature was 126.7 degrees F on 1/5/2026, 128.1 degrees F on 1/6/2026, 130.1 degrees F on 1/7/2026, 129.6 degrees F on 1/8/2026, and 130.1 degrees F on 1/9/2026. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of January 10th -January 16th, 2026, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 134.2 degrees F on 1/10/2026, 133.6 degrees F on 1/11/2026, 131.4 degrees F on 1/12/2026, and 129 degrees F on 1/13/2026.-In SCU 105, 106, 107, and 108 the temperature was 130.1 degrees F on 1/10/2026, 133.1 degrees F on 1/11/2026, 128.6 degrees F on 1/12/2026, and 129.6 degrees F on 1/13/2026. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of January 19th -January 23rd, 2026, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 137.5 degrees F on 1/19/2026, 134.6 degrees F on 1/20/2026, 132.6 degrees F on 1/21/2026, 128.1 degrees F on 1/22/2026, and 126.1 degrees F on 1/23/2026.-In SCU 110, 111, 112, 105, and 106 the temperature was 138.9 degrees F on 1/19/2026, 131 degrees F on 1/20/2026, 130.1 degrees F on 1/21/2026, 128.1 degrees F on 1/22/2026, and 126.1 degrees F on 1/23/2026. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of January 27th -January 30th, 2026, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 132.1 degrees F on 1/27/2026, 130.6 degrees F on 1/28/2026, 131 degrees F on 1/29/2026, and 130.6 degrees F on 1/30/2026.-In SCU 112, 111, 110, and 108 the temperature was 131 degrees F on 1/27/2026, 130.4 degrees F on 1/28/2026, 128.4 degrees F on 1/29/2026, and 126.2 degrees F on 1/30/2026. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of (continued on next page)</p>		

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NAME OF PROVIDER OR SUPPLIER  Adept Nursing & Rehab of Sutherland		STREET ADDRESS, CITY, STATE, ZIP CODE  333 Maple Street Sutherland, NE 69165	
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<p>F 0689</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Some</p>	<p>February 2nd -February 6th, 2026, revealed the water temperature was greater than 120 degrees Fahrenheit (F):-In SCU Dining room the temperature was 126.1 degrees F on 2/2/2026, 123.6 degrees F on 2/3/2026, 129.4 degrees F on 2/4/2026, 131.2 degrees F on 2/5/2026, and 130.4 degrees F on 2/6/2026.-In SCU 112, 111, 110, 105, and 106 the temperature was 129.6 degrees F on 2/2/2026, 130.1 degrees F on 2/3/2026, 127.2 degrees F on 2/4/2026, 130.4 degrees F on 2/5/2026, and 127.4 degrees F on 2/6/2026. A record review of the facility's Direct Supply TELS Logbook Documentation Water Temps for the week of February 23rd -February 27th, 2026, revealed a comment Thursday the 19th I was stripping a room floor and that Friday I was out sick and all this week just as well. There were no temperatures recorded on the document. An interview on 3/3/36 at 8:45 AM with the Regional Director of Operations (RDO) confirmed that the TELS water temperature logs indicated the IJ started in April 2025. Abatement Statement:1. Correction to the residents affected #26, 29, 9, 40, 15, and 38:-Hot water heaters were turned down to 120 degrees.-All hot water usage was ceased for resident usage.-All resident sinks hot water was turned on and monitored by a staff member until temperature was under 120 degrees.-Baths were stopped until bathroom water temperatures were under 110 degrees.-Education to all staff to not use resident care area water without taking a temperature and to not use the sink for hand washing if the temperature is over 120 degrees. Staff educated on how to take water temperatures.-Maintenance Director educated on safe temperature range. 2. System Changes: The facility took the following actions to prevent an adverse outcome from reoccurring. (Completion Date: 3-2-26)-Safe Water Temperature Policy was educated to all staff that are working and will continue to be reviewed with all staff prior to their next shift until everyone has completed the education.-Utilize TELS to educate maintenance staff or designated staff doing water temperatures on what are acceptable water temperatures and document water temperatures in TELS and review what acceptable water temperatures are and that no temperatures that were taken exceed the acceptable safe water temperatures of 100 degrees to 120 degrees in resident care areas. -If any temperatures exceed the acceptable safe water temperature of 120 degrees the water source will be shut down until temperature can be within acceptable range. Nursing staff and Administrator will be notified of out of range temperatures immediately and hot water heater will be adjusted to bring temperatures down. 3. Monitoring:-Performance Improvement Project (PIP) was implemented and presented to all Department Heads on 3-2-26. Monitoring will be completed by Administrator by reviewing water temperature logs 5 x a week for 2 weeks 3 x a week for 2 weeks then monthly for 2 months. All findings will be discussed at the monthly QAA meeting for a minimum of three months or until the pattern of compliance is maintained for accuracy. At the time of the survey, the violation was determined to be at the immediate jeopardy level K. Based on observation, interview and record review completed during the onsite visit, it was determined the facility had implemented corrective action to remove the IJ violation at the time. A final revisit will be conducted to determine if the facility is in substantial compliance with participation requirements. At the time of exit, the severity of the deficiency was lowered to the E level.</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>The facility failed to prepare foods according to the recipe, including pureed foods, to ensure the nutritive value was maintained. This had the potential to affect all 42 residents. Pureed residents were 1, 5, 22. Licensure Reference Number 175 NAC 12-006.09(J)(i) Based on observation, record review, and interviews, the facility failed to prepare foods according to the recipe, including pureed foods for Residents 1, 5, and 22, to ensure nutritive value was maintained. This had the potential to affect all residents. Findings are: A continuous observation in the kitchen on 3/4/26 from 9:05 AM through 10:45 AM revealed Cook-B performed the following: At 9:15 AM, Cook-B removed 1.5 pounds (lbs) of sliced raw bacon from a package, then chopped the bacon into small pieces. The bacon was added to a skillet and cooked on the stove until 9:23 AM. At 9:25 AM, Cook-B measured 32 ounces (oz) of sour cream into a measuring cup. At 9:28 AM Cook-B cracked 30 uncooked eggs into a bowl, then whisked them. At 9:46 AM, Cook-B removed 12 pounds of spinach from a colander which had been draining over the sink, then transferred it into a mixing bowl. The bacon, sour cream, and eggs were mixed with salt, pepper, and sauteed onions in a bowl, then combined with the spinach. All ingredients were placed in a stainless-steel pan and put into the oven. A record review of a facility document dated 2026, titled Dining Manager, Spinach bake, revealed a list of ingredients and cooking instructions for that dish, and included the following ingredient amounts calculated for 46 servings: Spinach, chopped frozen, 7 pounds 10 oz. Bacon, raw, 3 pounds 11 oz. Sour cream, 4 lbs, 10 oz. (74 oz total). Eggs, large, 1 3/4 each serving, with 46 servings requiring 80.5 eggs. Other ingredients were measured in accordance with the recipe. An interview on 3/04/2026 at 1:43 PM with the Dietary manager (DM) confirmed that Cook-B did not prepare the spinach bake according to the recipe as written and should have. B. A continuous observation in the kitchen on 3/4/26 from 9:05 AM through 10:45 AM revealed the following: At 10:04 AM, Cook-B removed a 16-ounce container of Sysco pork base from the refrigerator, then filled a pitcher with hot tap water. Cook-A added 1 tablespoon of pork base into the pitcher which held 1 gallon (128 oz) of water. At 10:26 AM, Cook-B added the pork base water to the stainless-steel pan which held the pork tenderloin that was prepared for the lunch meal. At 10:27 AM, Cook-B put three scoops of meat in the blender, added some pork base water then pureed the meat. Cook-A stopped the blender, checked the texture of the meat mixture, added an unmeasured amount of thickener, then blended again. At 10:39 AM, Cook-B transferred the pork mixture into a small stainless-steel pan, covered with foil and placed in the steam table. A record review of the 16-oz Sysco pork base container revealed directions to add 1 teaspoon of base to 8 oz of boiling water, or add entire container to 5 gallons of boiling water. A record review of medical records in Point Click Care revealed that Residents 1, 5, and 22 were prescribed a pureed diet. An interview with Cook-B on 3/4/26 at 10:26 AM revealed there are 3 residents who receive the pureed diet. An interview on 3/04/2026 at 1:43 PM with the DM confirmed that Cook-B did not add enough pork base to the pitcher of water, which was then added in the pureed meat and later thickened, diluting the nutritive value for those three residents.</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> Based on observation, record review, and interviews, the facility failed to ensure the freezers were maintained at 0 degrees or below, failed to prevent the potential for cross contamination when handling raw meat, and failed to use or dispose of foods prior to expiration date, This had the potential to affect all 42 residents. Findings are: A. Record review of facility-provided documents of temperature records/documents from the walk-in freezer, the upright deep-freeze, and the refrigerator/freezer combination (records did not identify which freezer the temperature logs were related to) revealed the following measurements documented above 0 degrees Fahrenheit: September 2025, AM shift measurements -30 days with data listed, and 11 of 30 days (September 19th-30th) ranged from 6-20 degrees. (The PM shift had 25 of 30 days with documented temperatures, all below zero). September 2025, AM measurements listed 30 days of data that ranged from 2-11 degrees. PM measurements 24 days had data recorded, and all 24 ranged from 2-10 degrees. September 2025, AM measurements listed 30 days of data that ranged from 9-19 degrees. PM measurements 23 days had data recorded, and all 23 ranged from 8-12 degrees. October 2025, AM measurements 23 of 31 days with data, 20 out of 23 were above 0 degrees F (range 8-12 degrees). PM - 11 days with data, 7 days were above 0 degrees and ranged from 8-11 degrees. October 2025, AM - 25 days with data, 22 days temps ranged from 8-14 degrees, and three days marked, defrosting. PM - 10 of 31 days with data, all 10 ranged from 8-14 degrees. October 2025, AM - 25 days with data, 23 days temps ranged from 2-12 degrees. PM - 11 days with data, all 11 ranged from 2-10 degrees. October 2025, AM - 23 of 31 days with data, 20 out of 23 ranged 8-12 degrees. PM - 11 days with data, 7 days were above 0 degrees and ranged from 8-11 degrees. November 2025, AM - 27 of 30 days with data, 26 out of 27 ranged from 2-9 degrees. PM - 16 days with data, 11 days ranged from 2-4 degrees. November 2025, AM - 26 of 30 days with data, all 26 ranged from 8-20 degrees. PM - 18 days with data, all 18 days ranged from 8-11 degrees. November 2025, AM - 27 of 30 days with data, all 27 ranged from 4-10 degrees. PM - 21 days with data, all 21 days ranged from 4-12 degrees. December 2025, AM - 28 of 31 days with data, all 28 ranged from 6-15 degrees. PM - 11 days with data, all 11 days ranged from 9-11 degrees. December 2025, AM - 28 of 31 days with data, all 28 ranged from 2-10 degrees. PM - 12 days with data, 11 days ranged from 1-11 degrees. December 2025, AM - 28 of 31 days with data, all 28 ranged from 8-12 degrees. PM - 12 days with data, all 12 days ranged from 8-11 degrees. January 2026, AM - 31 days with data, which ranged from 8-21 degrees. PM - 12 days with data, all 12 days ranged from 8-11 degrees. January 2026, AM - 31 days with data, with 28 days which ranged from 2-10 degrees. PM - 21 days with data which ranged from 1-10 degrees. January 2026, AM - 29 days with data, with 23 days which ranged from 2-12 degrees, and three days marked defrost. PM - 21 days with data with 16 days which ranged from 1-15 degrees and three days marked defrost. February 2026, AM - 28 days with data, which ranged from 8-12 degrees. PM - 1 day with data, 9 degrees above zero. February 2026. AM - 28 days with data, 18 days which ranged from 2-18 degrees. PM - 2 days with data, 1 day at 1 degree. February 2026. AM - 28 days with data, with 23 days which ranged from 2-16 degrees. PM - 2 days with data, 1 day at 2 degrees. An observation on 3/2/26 at 11:30 AM of the upright deep-freezer revealed contents including ice creams, pies, and a cake. The ice cream containers were able to have the sides depressed/squished. The freezer portion of the refrigerator/freezer in the kitchen revealed more food containers that were able to have the sides squished. An interview on 3/2/26 at 11:40 AM with the Dietary manager (DM) revealed that the freezer temperature logs for February recorded temperatures for three different freezers: the walk-in freezer, the upright deep-freeze, and the refrigerator/freezer combination, and confirmed the logs did not specify which freezer each log belonged to, and this was the routine practice. The interview confirmed that the freezers should have been at zero degrees Fahrenheit or below. The interview also revealed that no logs were available (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>prior to September 2025, as the DM initiated the temperature monitoring after they were hired. An interview on 3/4/26 at 1:43 PM with the DM confirmed that all three freezers were not zero degrees Fahrenheit for most days recorded between September 2025 and the time of survey (as stated above) as required, and should have been.B.A continuous observation in the kitchen on 3/4/26 beginning at 11:54 AM through 12:05 PM revealed the following actions:At 11:54 AM Cook-B was wearing a glove on their left hand and had a bare right hand, entered the walk-in freezer then exited with three meat patties in their gloved hand. Cook-B put the patties in a skillet on the stove.Cook-B removed clear plastic film from the top of a large stainless-steel bowl containing Hawaiian dinner rolls. Cook-B picked up several packages of Hawaiian dinner rolls from a shelf and put them on the prep counter. Cook-B put a glove on the non-gloved hand. Cook-B removed the rolls from the packaging, broke them apart with both hands into single rolls and placed them in the large bowl. Cook-B obtained another piece of clear plastic film from the dispenser, touching the dispenser and film with both gloved hands. Cook-B picked up the empty roll packages and put them into a trash can.At 11:59 AM Cook-B opened a drawer under the prep counter, removed a spatula, walked to the stove and used the spatula to flip the meat patties while wearing the same gloves. Cook-B then obtained a bag of hamburger buns from a shelf and put them on the counter.At 12:00 PM Cook-B removed their gloves, put them in a trash can, and performed hand hygiene with soap and water.An interview on 3/4/26 at 1:43 PM with the DM confirmed that the meat patties were made of uncooked hamburger. The interview also confirmed that Cook-B did not remove their gloves or perform hand hygiene after handling raw meat and should have.C.An observation on 3/2/2026 at 11:24 AM in the dry storage room of the kitchen revealed the following:5, 46-ounce containers of ready-to-drink tomato juice with an expiration date of 2/16/26.3, 46-ounce containers of ready-to-drink prune juice with an expiration date of 2/15/26.1 undated 1-gallon zip lock bag of bananas cut in half with peels still on and tips cut off and moisture collected in the bag.An observation on 3/2/26 at 11:40 AM in the kitchen refrigerator revealed the following:One opened undated bag with 2 hard-boiled eggs partly liquefied.One 1-quart container of [NAME] latte liquid mix, expiration date February 2026.An interview on 3/2/26 at 11:50 AM with the DM confirmed that the tomato and prune juice containers were beyond their expiration dates, bananas, eggs, and [NAME] latte mix were no longer suitable for consumption, and that all should have been discarded.</p>		

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<p>F 0552</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that residents are fully informed and understand their health status, care and treatments.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Licensure Reference Number 175 NAC 12-006.05Based on record review and interview, the facility failed to ensure informed consent was obtained for 1 (Resident 1) of 5 sampled residents' psychotropic medications. The facility identified a census of 42.Findings:Resident 1 was admitted on [DATE] and had diagnoses of chronic obstructive pulmonary disease (a progressive lung disease that restricts breathing, often caused by smoking), Type 2 diabetes mellitus (a metabolic disorder when the body cannot regulate levels of sugar in the blood), schizophrenia (a mental disorder that affects how a person thinks, feels, and behaves), bipolar disorder (a mental illness with episodes of extreme mood changes), depression, and anxiety.A record review of Resident 1's medication orders in Point Click Care (PCC, an electronic medical record system), revealed that Resident 1 had physician orders for clonazepam (an antianxiety medication) 0.5 mg by mouth every 12 hours as needed for symptoms of anxiety with a order date of 01/28/2026, and lamotrigine (used to treat bipolar and epilepsy, a seizure disorder) 200 mg by mouth at bedtime for bipolar disorder with a order date of 1/12/26.A record review of Resident 1's progress notes on 12/7/25 and 12/8/25 at 1:28 PM revealed Resident 1 was noted to be taking clonazepam at that time.A record review of Resident 1's electronic medical record revealed no evidence of consent obtained or benefits and side effects explained for clonazepam or lamotrigine.An interview on 3/05/2026 at 10:22 AM with the Assistant Director of Nursing (ADON) revealed there was no consent in Resident 1's medical record for the psychotropic medications clonazepam and lamotrigine and there should have been.</p>		

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<p>F 0605</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Licensure Reference Number 175 NAC 12-006.05 (G)Based on record review and interview, the facility failed to ensure there was a duration for psychotropic medication for 1 (Resident 1) of 5 sampled residents. The facility identified a census of 42. Resident 1 was admitted on [DATE] and had diagnoses of chronic obstructive pulmonary disease (a progressive lung disease that restricts breathing, often caused by smoking), Type 2 diabetes mellitus (a metabolic disorder when the body cannot regulate levels of sugar in the blood), schizophrenia (a mental disorder that affects how a person thinks, feels, and behaves), bipolar disorder (a mental illness with episodes of extreme mood changes), depression, and anxiety. A record review of Resident 1's medication orders in Point Click Care (PCC, an electronic medical record system), revealed that Resident 1 had physician orders for clonazepam (an antianxiety medication) 0.5 mg by mouth every 12 hours as needed for symptoms of anxiety with an order date of 01/28/2026 and no end date. A record review of a facility document Pharmacist's recommendation to prescriber, with a recommendation date of 1/30/26, revealed the pharmacist recommended the provider give a stop date for the 1/28/26 clonazepam order, not to exceed 6 months for the last year for Resident 1. The document also revealed the pharmacist communicated that there was a 14 day stop on all PRN (when a medication is given on as-needed basis and not on a schedule) psychotropic medications unless the provider documents a clinical rationale and a new duration for use on the order. The same document included the provider's response, which was marked, disagree, and the clinical rationale given as anxiety, and was documented on 2/10/26. An interview on 3/05/2026 at 9:35 AM with the Assistant Director of Nursing (ADON) revealed there was no end date for Resident 1's medical record for the as needed psychotropic medication clonazepam and there should have been.</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Licensure Reference Number 175 NAC 12-006.09(H)(iv) Based on record review and interview, the facility failed to follow their bowel protocol to prevent constipation for 1 (Resident 29) of 5 sampled residents. The facility census was 42. Findings Are: A record review of a facility document BM (bowel movement) List revealed Bowel Routine as per facility protocol with the following guidance:-Give Prune Juice if no BM in 2 days.-Give MOM (milk of magnesia) if no BM in 3 days- Must document bowel sounds daily starting day 3 until BM occurs.-Give suppository if no BM in 4 days.-Notify MD (physician) if refused or no results from suppository on day 4. A record review of Resident 29's admission Record revealed the resident was admitted to the facility on [DATE] and had a diagnosis of chronic idiopathic constipation. A record review of Resident 29's admission Minimum Data Set (MDS, a federally mandated comprehensive assessment tool used to determine a resident's functional capabilities and helps nursing home staff identify health problems) dated 12/29/2025 revealed the resident had no constipation present at the time of the assessment. A record review of Resident 29's Order Summary dated 3/3/2026 revealed the following orders:-Stool Softener oral capsule (Docusate Sodium) 100 milligrams once a day for the prevention of constipation. This order had a start date of 12/20/2025.-Polyethylene Glycol powder (a laxative medication), give 17 grams every 24 hours as needed for constipation. This order had a start date of 12/19/2025. A record review of Resident 29's Task- B&amp;B Bowel Movements documentation for 2/2/2026 through 2/28/2026 revealed the resident had no bowel movements:-From 2/5/2026 through 2/10/2026, 6 days total.-From 2/15/2026 through 2/18/2026, 4 days total. A record review of Resident 29's Medication Administration Record for February 2026 revealed no evidence of their as needed polyethylene glycol being administered. A record review of Resident 29's Progress Notes for the month of February 2026 revealed no evidence of the resident being assessed or interventions being implemented related to their bowels. An interview on 3/5/2026 at 10:12 AM with the Assistant Director of Nursing (ADON) confirmed the facility did not assess Resident 29 nor provide their as needed medication to treat their constipation during the month of February.</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  285141	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  03/05/2026
NAME OF PROVIDER OR SUPPLIER  Adept Nursing & Rehab of Sutherland		STREET ADDRESS, CITY, STATE, ZIP CODE  333 Maple Street Sutherland, NE 69165	

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<p>F 0756</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.</p> <p>Based on record review and interview; the facility failed to ensure the attending physician reviewed and acted upon, or provided rationale for not acting upon, recommendations made by the pharmacist during their monthly medication regimen reviews for 1 (Resident 33) out of 5 sampled residents. The facility census was 42. Findings are: A. Record review of Resident 33's admission record dated 3/5/2026 revealed an admission date of 8/3/2023 with listed diagnoses: -Major Depressive Disorder, Recurrent-Post-Traumatic Stress Disorder-Alzheimer's Disease with Late Onset -Cerebral Infarction (Stroke) -Paranoid Schizophrenia (a chronic mental disorder with intense, irrational delusions and/or hallucinations, such as believing they are being plotted against or monitored) -Conversion Disorder with Seizures or Convulsions Record Review of Resident 33's order summary dated 3/4/2026 revealed the following medication orders: Desvenlafaxine (a serotonin-norepinephrine reuptake inhibitor (SNRI) used to treat major depressive disorder in adults) ER (extended release) oral tablet extended release 24-hour 50 milligram (mg), Give 1 tablet by mouth one time a day related to Major Depressive Disorder Quetiapine (an atypical antipsychotic used to treat schizophrenia, bipolar disorder, and major depressive disorder) Fumarate Tablet 25mg, Give 0.5 tablet by mouth at bedtime for Paranoid Schizophrenia related to other schizoaffective disorders Record review of Medication Regimen Review's from 12/24/2024, 1/27/2025, and 2/25/2025 revealed recommendations for a gradual dose reduction (GDR) from the Pharmacist, with no response from a physician until 3/29/2025 Record review of facility policy Medication Regimen Review Policy implemented on 8/1/2023 states The consulting pharmacist shall review each residents medication regimen monthly. Any recommendations made regarding changes to medication regimen will be put in writing and sent to the DON (Director of Nursing). The DON is responsible for forwarding these recommendations to the prescribing practitioner and providing the facility's Medical Director a copy of all irregularities found by the consultant pharmacist. If the pharmacist's recommendation is not addressed and a response is not received in 14 days from when they were provided to DON, the facility will re fax all remaining letters. After two attempts at reaching the prescriber, the facility may request the medical director review the recommendation. In this case the facility is to provide a copy of any new order generated to the original prescriber's office. Interview at 11:30AM on 3/5/2026 with the Assistant Director of Nursing (ADON) confirmed that nursing is responsible for faxing pharmacy recommendations to the prescribing physician. If there is no response from the first fax, staff would fax the pharmacy recommendation to the prescribing physician a second time. The ADON was unable to provide next steps if the prescribing physician did not respond to the second fax.</p>

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<p>F 0745</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Some</p>	<p>Provide medically-related social services to help each resident achieve the highest possible quality of life.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on record review and interviews, the facility failed to evaluate resources related to decision-making for 1 sampled resident (Resident 1) with cognitive impairment. The facility identified a census of 42. A record review of Resident 1's face sheet revealed that Resident 1 was admitted on [DATE] and had diagnoses of chronic obstructive pulmonary disease (a progressive lung disease that restricts breathing, often caused by smoking), Type 2 diabetes mellitus (a metabolic disorder when the body cannot regulate levels of sugar in the blood), schizophrenia (a mental disorder that affects how a person thinks, feels, and behaves), bipolar disorder (a mental illness with episodes of extreme mood changes), depression, and anxiety. The record also revealed that Resident 1 made decisions on their own behalf and that there was not a power of attorney (a legal document that allows one person to act on behalf of another) or guardian (a court-appointed person who has legal authority over someone who can no longer make sound decisions about themselves). The face sheet also revealed Resident 1 had a diagnosis of cognitive communication deficit. An interview on 3/2/26 at 4:27 PM with Resident 1's family member revealed Resident 1 had two family members who served as co-guardians of Resident 1 for 14 years due to their severe mental illness. The interview also revealed the guardianship was legally dissolved in 2017 or 2018 after the family member could not find a substitute guardian while they were unable to continue due to the family member's medical reasons. The interview revealed that the family member still did not make decisions for Resident 1, and that they have not been a decision-maker since the guardianship was dissolved. A record review of Resident 1's electronic medical record in Point Click Care (PCC) revealed a BIMS assessment (Brief Interview for Mental Status, a 15-point cognitive screening tool that tests orientation and memory) was completed several times with the resident with the following results: (13-15 normal/intact cognition, 8-12 moderately impaired cognition, 0-7 severely impaired cognition). On 4/7/25 Resident 1 scored 8 out of 15 possible points. On 6/26/25 Resident 1 scored 10 out of 15 points. On 7/26/25 Resident 1 scored 8 out of 15 points. On 8/21/25 Resident 1 scored 7 out of 15 points. On 9/16/25 Resident 1 scored 7 out of 15 points. On 10/23/25 Resident 1 scored 8 out of 15 points. On 1/7/26 Resident 1 scored 0 out of 15 points. On 2/2/26 Resident 1 scored 0 out of 15 points. A record review of Resident 1's nursing progress notes from 1/6/26 at 2:33 PM revealed that Resident 1 did not have a current POA (power of attorney) on file at the facility. A record review of Resident 1's care plan revealed the following goals and interventions: Behavior management, staff should reorient resident to person, place, time and situation, date initiated 03/19/2024. The resident has impaired cognitive function or impaired thought processes related to difficulty making decisions and BIMS score less than 13, date initiated 12/08/2023, revision on 10/24/2025. Give simple directions using simple words and short sentences, date initiated 12/08/2023. Resident dependent on staff for cognitive stimulation, activity attendance, and social interaction related to cognitive impairment and was at risk for isolation, date initiated 03/29/2024, revision on 10/24/2025. Resident unable to effectively communicate the presence of pain and is dependent upon staff to monitor and identify signs and symptoms of pain and to provide the appropriate interventions, date initiated 05/01/2025, revision on 01/06/2026. Determine whether resident can make their own medical decisions as necessary, date initiated 03/13/2024. An interview on 3/3/25 at 2:44 PM with the Social Services Designee (SSD) revealed Resident 1 has had a BIMS score below 11 since they were admitted in 2023. The interview also revealed the facility had attempted to get Resident 1 to appoint a POA but Resident 1 did not want to do that, and there was not any documentation of that communication taking place. The interview revealed the facility was contacted by the hospital on a recent admission regarding whether the resident had a POA and they had to explain to the hospital staff the resident did not have a POA or any documents stating who assists the resident in decision making while cognitively impaired. An interview with the Administrator (continued on next page)</p>		

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F 0745  Level of Harm - Potential for minimal harm  Residents Affected - Some	on 3/3/26 at 3:07 PM confirmed the resident does not have a representative in place. An interview on 3/5/26 at 11:23 AM SSD confirmed there was no documentation with Resident 1's medical providers discussing Resident 1's decision-making capacity, decreased BIMS scores, or cognitive decline.		