STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	365292	A. Building B. Wing	04/18/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Hanover Healthcare Center	435 Avis Avenue NW Massillon, OH 44646

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)
F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards. 45442 Based on observation, interview, and policy review the facility failed to ensure a clean and sanitary kitchen. This had the potential to affect 104 residents receiving meals from the kitchen. The facility identified two residents (#162 and #163) who received nothing by mouth. The facility census was 106. Findings include: Observation during the initial kitchen tour on 04/17/24 at 11:35 A.M. with Cook #19 and Corporate District Manager #109 revealed the following concerns: In the walk-in refrigerator: a 46 ounce (oz) container of Sysco nectar thick lemon water dated 11/2/23 and a use by date of 02/28/24, a 46 oz container of Sysco honey thick lemon water dated 01/23/24 with a use by date of 04/09/24, a five-pound container of ricotta cheese open and undated, a one-quarter pan of barbecue pork with a date of 04/06/24 and a use by date of 04/12/24, and a one-quart container of fruit cocktail open and undated. In the reach in refrigerator a one-quarter pan of previously cooked green beans was found undated, open to air, and an undated container of prepared tuna fish sandwich spread. In the kitchen preparation area, the Robot Coupe was observed heavily soiled with dried food splatter on the base and sides. The Robot Coupe lid also had a plastic wrap cover on the inside with a moist splattered food from a different type of food. Observation of the 04/24 temperature logs for the walk-in refrigerator, walk in freezer, and reach in refrigerator were not completed and were missing temperatures for the dates of 04/04/24, 04/05/24, 04/06/24, 04/12/24, 04/13/24, 04/14/24, 04/15/24, and 04/16/24. Review of the dishwasher machine log for 04/24 revealed no temperatures recorded for the following dates: 04/01/24, 04/02/24, 04/04/24, 04/05/24, 04/06/24, 04/08/24, and 04/09/24. The above findings were confirmed by Cook #19 and Corporate District Manager #109. Cook #19 also confirmed there was no posted cleaning schedule for the kitchen. (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Review of the 09/2017 revised facility policy called; Equipment revealed all foodservice equipment will be clean, sanitary, and in proper working order. All food contact equipment will be cleaned and sanitized after every use. Review of the 02/23 revised facility policy called; Food Storage: Cold Foods revealed all foods will be stored wrapped or in covered containers, labeled and dated, and arranged in a manner to prevent cross contamination. Review of the 02/2017 facility policy called; Labeling and Dating revealed all time/temperature control for safety (TSC) foods that are to be held for more than 24 hours at a temperature of 40 degrees or less, will be labeled and dated with a prepared date (Day 1) and a use by date (Day 7). This deficiency represents non-compliance investigated under Master Complaint Number OH00152582.