

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395552	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/27/2025
NAME OF PROVIDER OR SUPPLIER Bethlen Hm of the Hungarian Rf of America		STREET ADDRESS, CITY, STATE, ZIP CODE 66 Carey School Road Ligonier, PA 15658	

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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>47819</p> <p>Based on review of facility policies, as well as observations and staff interviews, it was determined that the facility failed to ensure that food stored in the residents' refrigerators/freezers was properly dated, labeled, and secured in two of four refrigerators observed (100 and 500 hall kitchenettes).</p> <p>Findings include:</p> <p>The facility's date marking policy for food safety, dated November 27, 2024, indicated that all food brought in for residents or stored for resident use will be secured and clearly dated and labeled.</p> <p>Observations of the resident's refrigerator/freezer in the 100-hall kitchenette on March 27, 2025, at 9:10 a.m. revealed the following items that were opened and undated and/or unlabeled: a 32-ounce container of chicken broth, 24-ounce jar of pickles, two half-gallon containers of milk, two 24 ounce half-gallon containers of raspberry ice tea, 46 ounce container of thickened apple juice, 48 ounce containers of macaroni and potato salad, and a 20 ounce bag of chicken chunks, which additionally was open to the air.</p> <p>Observations of the resident's refrigerator/freezer in the 500-hall kitchenette on March 27, 2025, at 9:20 a.m. revealed undated and/or unlabeled items, including one pint and one quart of vanilla ice cream. In addition, the quart of vanilla ice cream was open to the air.</p> <p>Interview with the Director of Nursing on March 27, 2025, at 10:03 a.m. confirmed that all items in the residents' refrigerators/freezers should have been secured, dated, and labeled.</p> <p>28 Pa. Code 211.6(f) Dietary Services.</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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