

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 435119	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/10/2024
NAME OF PROVIDER OR SUPPLIER Wilmot Care Center Inc		STREET ADDRESS, CITY, STATE, ZIP CODE 501 4th St Wilmot, SD 57279	

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 - 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>25107</p> <p>Based on observation, testing, interview, and policy review the provider failed to:</p> <p>*Maintain the temperature of the walk-in cooler below 41 degrees Fahrenheit (F).</p> <p>*Maintain the cleanliness inside of the walk-in cooler. Findings include:</p> <p>1. Observation and testing on 6/10/24 at 1:00 p.m. in the walk-in cooler revealed:</p> <p>*The air blowing from the cooling unit felt warm.</p> <p>*The thermometer in the walk-in cooler read 60 degrees F.</p> <p>*The cooling fins of the walk-in cooler were completely covered with ice. The air could not move through the cooling fins to chill the walk-in cooler.</p> <p>*Testing of the ambient air temperature of the walk in cooler revealed it was 59 degrees F.</p> <p>*Testing of a bottle of water that had been stored in the walk-in cooler revealed it was 53 degrees F internal temperature.</p> <p>Review of the provider's temperature logs revealed:</p> <p>*There were two different forms used for logging temperatures.</p> <p>*The cooler/freezer logs revealed there had not been any temperatures recorded from 6/10/24 back to 4/13/24.</p> <p>*The refrigeration temperature log revealed the last log was from April 2024. It did not specify which refrigerator it was for and April 26th was the only recorded temperature.</p> <p>*Daily or weekly temperatures were not being recorded since April 2024.</p> <p>Interview on 6/10/24 at 3:42 p.m. with [NAME] C revealed:</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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>*Checking the temperatures had been changed to once a week on Fridays.</p> <p>*The individual who was responsible for taking those temperatures had not been completing that task.</p> <p>Review of the provider's Resident Refrigerator and Freezer policy dated 7/14/2017 revealed:</p> <p>Acceptable temperature ranges were 35 degrees Fahrenheit (F) to 40 F for refrigerators and less than 0 F for freezers.</p> <p>Monthly tracking sheets for all refrigerators and freezers were to be posted to record temperatures.</p> <p>Monthly tracking sheets were to include time, temperature, initials, and action taken. The last column was to be completed only if the temperatures were not acceptable.</p> <p>Evening dietary staff or a designee who served the HS (evening) snack, were to check and record refrigerator and freezer temperatures daily once per day.</p> <p>*There was a hand drawn line through daily once per day and weekly once a week was written by hand below it. The bottom of the policy had a handwritten note that indicated it was updated on 4/22/24 and was signed by dietary manager D.</p> <p>If the refrigerator or freezer temperature were found to be out of range, the staff member was to document the temperature, re-check the temperature in one hour, and document the re-checked temperature in the re-check temperature column. If the temperature continued to be out of the optimal range, staff were to notify the dietary manage/maintenance department.</p> <p>Interview on 6/10/24 at 3:54 p.m. with administrator A confirmed the policy provided was the policy the dietary department was following for their refrigerators.</p> <p>2. Observation on 6/10/24 at 1:00 p.m. in the walk-in cooler revealed:</p> <p>*There was a grey and black fuzzy mold-like residue on the shelves where the food was stored.</p> <p>-That residue could be removed when the surface of the shelf was wiped.</p> <p>-About twenty five percent of the surface of the shelves had that visible residue.</p> <p>*There were multiple grey/black fuzzy round mold-like spots on the fan grates. Those fan grates were where the fans recycled air to cool the walk-in cooler. That air would be circulated throughout the walk-in cooler.</p> <p>Review of the provider's weekly cleaning list revealed:</p> <p>*The last cleaning list was dated April. April one was on a Monday which coincides with 2024.</p> <p>*There were tasks listed for each day.</p> <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>*There was nothing documented on it that would have indicated that any of the tasks had been completed.</p> <p>*No records were provided for May or June 2024.</p> <p>Review of the provider's revised October 2008 dietary services sanitization policy revealed:</p> <p>*1. All kitchens, kitchen areas and dining areas shall be kept clean, free from litter and rubbish and protected from rodents, roaches, flies, and other insects.</p> <p>*2. All utensils, counters, shelves, and equipment shall be kept clean, maintained in good repair and shall be free from breaks, corrosions, open seams, cracks and shipped areas that may affect their use or proper cleaning. Seals, hinges, and fasteners will be kept in good repair.</p> <p>*3. All equipment, food contact surfaces and utensils shall be washed to remove or completely loosen soils by using the manual or mechanical means necessary and sanitized using hot water and /or chemical sanitizing solution.</p> <p>*17. The Food Service Manager will be responsible for scheduling staff for regular cleaning of kitchen and dining areas. Food service staff will be trained to maintain cleanliness throughout their work areas during all tsks, and to clean after each task before proceeding to the next assignment.</p> <p>Interview on 6/10/24 at 6:30 p.m. with administrator A and director of nursing B confirmed:</p> <p>*The temperature in the cooler was not safe for storing potentially hazardous foods.</p> <p>*Temperature logs had not been done correctly since 4/13/24</p> <p>*The walk-in cooler was not clean.</p> <p>*There was no documentation to support when the walk-in cooler had last been cleaned.</p>		