

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675440	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/08/2026
NAME OF PROVIDER OR SUPPLIER South Dallas Nursing & Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 3808 S Central Expwy Dallas, TX 75215	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to provide a safe, functional, sanitary, and comfortable environment for two rooms (Halls 100 and 600), exit glass doors on 3 of (100, 200, and 300) 6 facility resident halls and area between the kitchen and dining room reviewed for environment. The facility failed to ensure:- that there was not an accumulation of dust, debris, stains, and bacteria, creating an unsanitary, unkempt, exit room [ROOM NUMBER], 200, and 300 door plates; - that there were not torn vinyl with ripped edges exposing the black protective padding on the flooring near kitchen and dining area on 04/08/2026;- the air conditioning unit in Resident #3's room did not gapping away from the wall with gunk (sticky substance) with dirt, soft fluffy black substance on the top, right, and left of the air conditioning unit and the right side of the unit did not have a small tear in the wall structure; and- that there was not a missing toilet tank cover Resident #3's room on 04/08/2026. The failures could result in residents having diminished quality of life due to the lack of a well-kept environment and equipment and affect the staff and visitors. Findings included: During an observation on 04/08/2026 at 1:20 PM, of the 100, 200, and 300 halls revealed the exit glass doors at the end of each hallway had an accumulation of dark black dirt and leaves. During an observation on 04/08/2026 at 1:20 PM, the flooring in the dining room next to the kitchen entrance and ice machine was damaged, with torn vinyl. The following was observed in Resident #3's room on 04/08/2026 at 1:20 PM: The A/C unit was loose and separated from the wall creating gaps. The unit was observed with gunk (sticky substance) and matted dirt (black sticky, greasy) around the unit, and a hole in the wall structure to the right side of the A/C unit next to the resident closet. The toilet was missing the tank cover. During an interview on 04/08/2026 at 1:35 PM, the ADON said it was all of the staffs responsibility to report environment and maintenance needs immediately to prevent staff and resident from accidents, injuries and exposure, to bacteria, insects, bugys, and rodents that may result in changes of health. During an interview on 04/08/2026 at 2:00 PM, CNA-A stated that housekeeping was cleaning the residents' rooms. CNA-A had not observed the housekeepers cleaning the door and floors at the end of every hall. CNA-A stated staff were responsible for reporting environmental and housekeeping issues to the Administrator. CNA-A stated failing to report could result in residents living in unsanitary conditions. During an interview on 04/08/2026 at 3:10 PM, the MHS revealed if the bathrooms needed repair, it was his responsibility. The MHS stated if there were any structure issues with gaps and holes in the wall, he contracted out when notified. He stated that they just hired housekeeping staff and he was monitoring. He stated he had not observed the condition of the doors on the 100, 200, and 300 halls to be soiled. He said the facility had problems maintaining housekeepers. He stated that some residents removed the toilet tank cover, however once the room number for Resident #3 was provided, it was determined that the resident was unable to remove the tank cover. He said unsanitary conditions failing to repair environment could result in resident accidents, unsanitary conditions, and rodent entry. During an interview on 04/08/2026 at 3:00 PM, the SW stated the residents report all environment concerns to the ADM and MHS. She said there have not been any observations of insects or rodents, nor reports by residents. During an interview on (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
---	-------	-----------

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675440	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/08/2026
NAME OF PROVIDER OR SUPPLIER South Dallas Nursing & Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 3808 S Central Expwy Dallas, TX 75215	
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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>04/08/2026 at 3:30 PM, ADM stated that all facility staff were trained on reporting maintenance and environment repairs immediately to prevent residents, visitors, and staff from injuries. The ADM was not aware of the A/C unit in Resident #3's room, nor the debris and dirt that had accumulated on residents halls (100, 200, and 300.). ADM stated it was the MHK responsible to monitor and ensure facility maintenance and repairs were completed timely. said he will continue to repair and address the concerns in the building. ADM said the conditions place residents at risk for diminished quality of life and accidents. The environment policy was requested on 04/08/2026 at 3:30 PM from the ADM and was not received.</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675440	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/08/2026
NAME OF PROVIDER OR SUPPLIER South Dallas Nursing & Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 3808 S Central Expwy Dallas, TX 75215	
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 - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>Based on observation, interview, and record review, the facility failed to store, prepare, distribute and serve food in accordance with professional standards for 1 of 1 kitchen reviewed in that: 1. The facility failed to ensure the floor drain was covered in the kitchen on 04/08/2026. 2. Gnats were observed in the kitchen on 04/08/2026. 3. A rodent was observed coming out of the kitchen sink on 04/08/2026. The failures could place residents at risk for food born illnesses, infections, and possible hospitalization. Findings included: During an observation on 04/08/2026 at 1:23 PM the kitchen revealed the following: An infestation of about 30 gnats swarming all over the plates and old food on the tray rack in the dishwashing room. A rodent exited the plastic bag covering a non-operational sink in the kitchen near prep area. The drain in the floor near the dishwashing area was not covered. A large rat trap with a small food scooper was observed on the bottom rack of the food preparation table in the kitchen. The dining room staff were not preparing food at the time of the observation. During an attempted interview on 04/08/2026 at 1:40 PM with the dietary staff (DA-B, DA-C, and DW-A who were present during the observations of the rodent exiting the sink) resulted in them all declining to be interviewed on kitchen insect and rodent concerns. During an interview on 04/08/2026 at 1:35 PM, with the ADON stated that there had not been any resident reports of insects in food. ADON reported that there had not been any resident illnesses related to food or kitchen related issues. During an interview on 04/08/2026 at 2:50 PM, the DM stated he transitioned from housekeeping to DM 2 weeks ago. He said the plumbing repairs were conducted as needed. The DM stated the sink stopped up at times causing standing water. He said that he had just vacuumed up the standing water. The DM stated that a plastic trash bag was used to cover the sink to prevent bugs, insects, and rodents from entering the kitchen. He said the sink did not work and he would request that the sink be removed to prevent further concerns with pest and rodents. He stated the facility has a history of pest and rodents observations; however they are back. He stated the floor drain next to the dishwashing room had a cover, but he removed it during the vacuuming. He stated the Housekeeping/Maintenance Supervisor was notified of kitchen repair and plumbing issues on 04/08/2026 at 12:00 PM. The DM stated they could notify PCC anytime they needed assistance or have observed rodents and gnats. The DM said the last visit was today 04/08/2026 at 10:00 AM. PCC removed rodents, treated them for rodents and pest. He stated when the sink gets stopped up, the water overflows and gnats tend to multiply. He did not have an answer for the treatment of the gnats. He stated that the insects, rodents, and rat traps created an unsanitary environment that could make residents sick. The DM denied reported incidents of resident illness related to the pest and insect issues. During an interview on 04/08/2026 at 3:10 PM, The MHS stated the Administrator and MHS had increased the pest control contract according to the recommendation of the PCT dated 02/25/2026. The MHS stated the PCC was visiting daily and he had observed improvement in the facility. He stated that PCT and maintenance checked the glue traps daily and removed rodents. He stated that all rat traps should be on the floor in areas away from others and not on a food prep table. He stated he would contact the plumber about the sink and dishwasher overflowing drain. He said unsanitary conditions and failing to repair the environment could result in resident accidents, unsanitary conditions, and rodent entry. During an interview on 04/08/2026 at 3:15 PM, the DON stated that she had not observed rodents and insects in the building nor have residents reported observations. She said rodents and an infestation could potentially lead to resident illnesses due to unsanitary conditions. The DON said it was her responsibility as well as all staff to ensure unsanitary conditions, rodent and insect activities were reported immediately by staff. During an interview on 04/08/2026 at 3:30 PM, the ADM said residents had not complained about rodent and pest issues regarding dietary services. He stated that he had signed a new pest agreement, on 03/31/2026 (the contract reviewed was dated 02/24/2025.) with the PCT, and the PCT addressed the additional treatments and services needed to remedy the rodent (continued on next page)</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675440	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/08/2026
NAME OF PROVIDER OR SUPPLIER South Dallas Nursing & Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 3808 S Central Expwy Dallas, TX 75215	
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 - Some</p>	<p>and insect problems. He expected the DM to report all kitchen concerns immediately to him and the MHS, and he could contact the PCC himself to request onsite treatment. He would report the gnats to the PCC. He also stated that HHSC RRT were visiting and working with him weekly to address facility sanitation, repairs maintenance, and environmental concerns. He declined to answer questions about observations and reports of rodents and insects. He provided the new PCT, and statement for review, as well as the RRT treatment plan for the building. He further stated that all facility staff were trained on reporting maintenance needs and resident safety precautions to prevent unsanitary conditions, resident and staff accidents, resident and staff illnesses, and decline in facility structures. The ADM denied reports and incidents of resident illnesses related to food. Record review of the facility's PCC visit titled Customer Detail dated 03/24/2026 reflected Checked in with MHS inspected the kitchen .Captured 3 rats (large type of rodent) in the kitchen .set glue traps(adhesive boards that catch insects and rodents and reset traps, treated to prevent ants, roaches crawling insects applied treatment to repel American and German cockroaches, ants, ground beetles, pill bugs, and spiders, crawling insects and mice. captured a total of 3 rats and 8 mice (small type of rodent) during visit. Treated 50 fruit flies (small insect that feeds off decaying fruit)Record review of the Facility's policy titled Sanitation dated 10/2008 reflected in part Policy Statement: The food service area shall be maintained in a clean and sanitary manner. Policy Interpretation and Implementation. I. 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.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 chipped areas that may affect their use or proper cleaning. Seals, hinges, and fasteners will be kept in good repair.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 solutions.Dishwashing machines must be operated using the manufacture specifications.Sanitizing of environmental surfaces must be performed with one of the following solutions: The Food Services 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 tasks, and to clean after each task before proceeding to the next assignment.</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675440	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/08/2026
NAME OF PROVIDER OR SUPPLIER South Dallas Nursing & Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 3808 S Central Expwy Dallas, TX 75215	
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 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</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 for 1 of 1 facility reviewed for pests.1.An anonymous resident reported observing a rodent in his room on 02/11/2026.2.Gnats and one rodent were observed in the during the kitchen inspection on 04/08/2026.3.Resident #3 reported observing rodents in his room on 04/07/2026.4.Kitchen observation on 04/08/2026 of a small mice/rodent exiting the kitchen sink that was covered with a clear plastic trash bag. The failures could result in residents having infections, exposure and inhalation of environmental substance, and diminished quality of life. Findings included:Record review of grievance log from 02/01/2026 to 04/07/2026 revealed no reports of rodent, pest, and insect issues. Record review of the facility's maintenance log dated 04/06/2026 from the BOM revealed an observation of a rodent in the front office. Record review of the pest sighting log from 01/30/2026 to 04/06/2026 reflected on 04/06/2026 a rat observed in the front office. During an interview on 04/08/2026 at 1:20 PM, Resident #1 stated that he observed a rodent coming out of his closet 04/07/2026 at night. During an interview on 04/08/2026 at 1:35 PM, with ADON she stated that she denied observing rodents and insects in the building. She have not received resident reports of insects and rodents in the building. She said rodents and infestation could potentially lead to resident illnesses due to unsanitary conditions. ADON said all staff were responsible for reporting concerns with environment changes, rodents, and insects to protect resident from unsanitary living conditions related to bugs and rats.During an interview on 04/08/2026 at 2:00 PM, CNA-A stated a rodent was observed on 04/07/2026 in the hallway. The CNA-A stated the residents did not observe the rodent, nor reported pest and rodent concerns on her unit. CNA-A stated that the PCC left glue traps to be put down on the floor in areas where rodents were observed. CNA-A stated that PCC came and removed a rodent off a glue trap this morning (specific time unknown). CNA-A stated that housekeeping were cleaning the residents rooms. CNA-A had not observed the housekeepers cleaning the door and floors at the end of every hall. During an interview and review on 04/08/2026 at 2:20 PM with an anonymous resident revealed he wanted the surveyor to see a video on his phone that was stamped 02/11/2026. The Surveyor reviewed a video that revealed on the resident's side of the room (matched furnishing, and personal items) a rodent on the floor, near his bed. Resident stated that he did not report the observations of the rodent to anyone, and he has observed rodents in his area 2 other times. During an interview on 04/08/2026 at 2:45 PM, the BOM stated she observed a rodent come in the front reception office, then headed down the hallway. The BOM stated she reported it immediately to the Administrator and MHS. The BOM stated that this had been an on and off issue and the facility had an active contract for pest control and treatment as ongoing. The BOM stated the rodents in the building could cause the residents to develop infections and get sick. During an interview on 04/08/2026 at 2:50 PM, the DM stated a plastic trash bag was used to cover the sink in the kitchen that did not work to prevent bugs, insects, and rodents from entering the kitchen. The DM stated the Housekeeping/Maintenance Supervisor, and he could notify the PCC anytime they needed assistance or observed rodents and gnats. He did not have an answer for the treatment of the gnats. He stated that the gnats and observation of the rat in the kitchen created an unsanitary environment. The DM stated he reported rodent and insect observations immediately to the MHS, ADM, and PCC for an onsite visit to prevent residents from being exposed to uncomfortable and unsanitary conditions. During an interview on 04/08/2026 at 3:00 PM, the SW stated in her role, she was responsible for regular contact and visits to resident rooms, as well as reporting grievance and complaints to the ADM. SW said she had not personally observed rodents and insects, and the resident's had not reported any observations or concerns. She said all staff were responsible for reporting complaints, observations, and reports of rodents and insects immediately to ADM and MHS. The SW said the MHS and ADM were doing their best to make sure the facility was clean and in good repair. During an interview on 04/08/2026 at 3:15 PM with the DON, she stated that (continued on next page)</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675440	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/08/2026
NAME OF PROVIDER OR SUPPLIER South Dallas Nursing & Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 3808 S Central Expwy Dallas, TX 75215	
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 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>she had not observed rodents and insects in the building nor had residents reported observations. She said rodents and infestation could potentially lead to resident illnesses due to unsanitary conditions. The DON said it was her responsibility as well as all staff to ensure unsanitary conditions, rodent and insect activities were reported immediately. During an interview on 04/08/2026 at 3:10 PM, the ADM stated that the MHS was responsible for pest control, and he had recently signed another contract increasing pest treatment on the property. The ADM stated that the PCC was visiting daily, and he has observed improvement in the facility. He stated that PCT and maintenance checked the glue traps daily and removed rodents. Record review of the Grievance log from 2/01/2026 to 04/07/26 revealed no reports of rodent, pest, and insect issues. Record review of the facility's PCC visits titled Customer Detail dated 03/02/2026 reflected exterior inspection The inspection revealed observations and details of moisture damage soft back door, hole in exterior wall, cracks in mortar, bricks, gaps and rotten structure from water damage on the exterior. Kitchen inspection conducted on 03/02/2026 reflected poor sanitation, accumulated debris around the pipes, food residue under appliances/machinery/equipment severity medium. The PCC recommended an advance plan to address the insects, bugs, rodents, and pest. Record review of the facility's PCC visits titled Customer Detail dated 02/23/2026, reflected [PCC] checked in with MHS inspected treated the interior kitchen .common areas of the facility and resident rooms to prevent roaches, ants, and crawling insects. Treated fruit flies in the kitchen dishwashing room. Captured mice (small size rodent) and 2 rodents (large size rodent) in the kitchen .set glue traps (adhesive boards that catch insects and rodents and reset traps, treated to prevent ants, roaches crawling insects applied treatment to repel American and German cockroaches, ants, ground beetles, pill bugs, and spiders, crawling insects and mice. captured a total of 3 rats and 8 mice (small type of rodent) during visit. Treated 50 fruit flies (small insect that feeds off decaying fruit). Recommended mass trapping to reduce rodent population. PCC captured 2 mice and 6 rodents during this visit. There were no PCC recommendation documented for this visit. Record review of the facility's PCC visits titled Customer Detail dated 03/09/2026 reflected [PCC] checked in with MHS inspected treated the interior kitchen .common areas of the facility and resident rooms to prevent roaches, ants, and crawling insects. completed property inspection treated the interior kitchen and other interior areas to prevent ants, roaches, and insects. Treated fruit flies. Captured 3 mice in the kitchen. Treated exterior perimeter (area), service rodent bait stations. PCC captured 3 mice, 3 rats, 1 ant, and 30 fruit and vinegar flies tiny (3-4 mm), yellowish-brown to dark brown insects with red or dark eyes. They are highly attracted to rotting fruit, fermenting liquids (vinegar, beer, soda), and decaying organic matter, where they lay eggs, causing infestations in homes and agricultural settings.). There were no PCC recommendation documented for this visit. Record review of the facility's PCC visits titled Customer Detail dated 03/24/2026 reflected [PCC] checked in with MHS inspected treated the interior kitchen .common areas of the facility and resident rooms to prevent roaches, ants, and crawling insects. Captured 3 rats (large type of rodent) in the kitchen .set glue traps (adhesive boards that catch insects and rodents and reset traps, treated to prevent ants, roaches crawling insects applied treatment to repel American and German cockroaches, ants, ground beetles, pill bugs, and spiders, crawling insects and mice. captured a total of 3 rats and 8 mice (small type of rodent) during visit. Treated 50 fruit flies (small insect that feeds off decaying fruit). There were no PCC recommendation documented for this visit. Record review of the facility PCT titled Commercial Service Purchase order.date of services 02/25/2025.C-Rodent - Commercial Rodent Premium Coverage: Involves sealing all potential rodent entry points throughout the building to prevent rodents access. Includes an initial mass trapping using a variety of traps and rodent insecticides to effectively reduce the rodent population.This replaces current rodent services. Includes 9 additional rodent bait stations to be strategically placed around the exterior.Following the exclusion process, 6 visits will be conducted for trapping and removal of any existing rodents within the facility.Includes ongoing maintenance of rodent bait stations and other rodent control devices to prevent future infestations. Regular inspections of the building are (continued on next page)</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675440	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/08/2026
NAME OF PROVIDER OR SUPPLIER South Dallas Nursing & Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 3808 S Central Expwy Dallas, TX 75215	
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 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>performed to identify, prevent, and repair any new potential entry points, ensuring long-term protection against rodents.Wildlife live trapping inside facility is included.No extra for rodent call backs.General Terms and Conditions Materials: The materials used in pest control work shall conform to federal, state, and local ordinances and laws. All pest control work shall be performed in a safe manner and in accordance with the most modern and effective procedures. Record review of the pest control policy dated May 2008 reflected in part Policy Statement our facility shall maintain an effective pest control program.Policy Interpretation and Implementation: This facility maintains an on-going pest control program to ensure that the building is kept free of insects and rodents.Pest control services are provided by [contractor name]. Windows arc screened at all times. (window screens secured at all times). Only approved FDA (ensures food safety) and EPA (ensures environment safety) insecticides (substance formulated to kill, repel, and control insects.) and rodenticides (a chemical substance designed to kill, repel, and control rodents) are permitted in the facility and all such supplies are stored in areas away from food storage areas.Garbage and trash are not permitted to accumulate and are removed from the facility daily.Maintenance services assist, when appropriate and necessary, in providing pest control services.</p>		