

Alabama Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>P5113</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/01/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>WESLEY GARDENS RETIREMENT CENTER - SPECIAL</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1555 TAYLOR ROAD MONTGOMERY, AL 36117</b>
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A 000	<p>Initial Comments</p> <p>On August 1, 2024, an unannounced licensure and complaint survey was conducted for this 16 bed Specialty Care Assisted Living Facility (SCALF) with a census of 15.</p> <p>One complaint was investigated during this survey. LC#20240130001 was substantiated. Deficiencies were written as a result of the complaint investigation.</p> <p>Deficiencies were cited during this survey for failure to operate in accordance with the Rules of the Alabama State Board of Health (SBOH), Alabama Department of Public Health (ADPH), Chapter 420-5-20, Alabama Administrative Code, Specialty Care Assisted Living Facilities. The deficient practices resulted in the potential for significant harm to all residents and requires a plan of correction.</p>	A 000		
A 303	<p>420-5-20-.03 (2) (a) Administration.</p> <p>(2) The Administrator.</p> <p>(a) Responsibility.</p> <p>1. The administrator shall be a direct representative of the governing authority in the management of the specialty care assisted living facility and shall be responsible to the governing authority for the proper performance of his or her duties.</p> <p>2. Any individual employed as an administrator shall be properly licensed.</p> <p>3. Any individual employed as an administrator shall meet all applicable statutory requirements.</p>	A 303		

Health Care Facilities  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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A 303	<p>Continued From page 1</p> <p>4. There must be an individual with experience in the day-to-day operation of the facility, who is authorized in writing, to act for the administrator during absences. Under no circumstances shall the facility operate without a licensed administrator for greater than 45 days.</p> <p>5. The administrator and any individual authorized to act as a substitute shall be at least 19 years of age.</p> <p>6. The administrator and any individual authorized to act as a substitute shall be of reputable and responsible character.</p> <p>7. The administrator shall ensure that adequate personnel are employed and on duty to meet the care needs of all residents 24 hours a day, 7 days a week.</p> <p>8. The administrator shall manage and direct staff activities in a manner that results in maintenance of a neat, clean, orderly, and safe environment and adequate care actually being provided at all times. If a facility has an adequate number of staff members on duty to meet the care and safety needs of all residents, but adequate care and safety is not being provided, then the facility does not meet this administration and management requirement.</p> <p>9. The facility administrator is responsible for ensuring that required training is provided to all staff.</p> <p>10. The administrator shall ensure that residents who have health or safety needs beyond the capability of the facility will be safely</p>	A 303		

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A 303	<p>Continued From page 2</p> <p>transferred or discharged to an appropriate setting.</p> <p>11. The administrator shall ensure that facility staff members observe each resident for changes in health and physical abilities and obtain appropriate medical attention when needed.</p> <p>12. The administrator shall ensure that plans of care for all residents are current and appropriate. This shall include the prearranged discharge plan.</p> <p>13. The administrator shall ensure that all deficient practices cited by the Department are corrected in a timely manner and that corrections are maintained.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the administrator failed to manage and direct staff to ensure staff were not sleeping while on duty. In addition, the administrator failed to ensure a resident who had care needs beyond the capability of the facility was safely transferred to an appropriate level of care.</p> <p>On August 1, 2024, the Alabama Department of Public Health performed an onsite investigation of complaint LC#20240130001 that alleged staff members were sleeping while on duty.</p> <p>Findings:  Staff members sleeping while on duty On the morning of August 1, 2024, an email was received with photos of staff sleeping in the</p>	A 303		

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A 303	<p>Continued From page 3</p> <p>common area of the unit.</p> <p>On the morning of August 1, 2024, Employee Identifier (EI)#3, a Licensed Practical Nurse (LPN), was interviewed. EI#3 was asked about staff sleeping while on duty and she named a current care associate, as sleeping on duty.</p> <p>A review of the March 2024, staff meeting agenda revealed, "... There will be no sleeping. ..."</p> <p>On the afternoon of August 1, 2024, EI#1, the Administrator, was interviewed. EI#1 was asked who was responsible for directing staff to perform their duties. EI#1 said department heads and ultimately him. He said the March staff meeting agenda included the reference to no sleeping because they had received a complaint that staff had been sleeping while on duty. EI#1 was asked to identify the two staff members sleeping in the SCALF unit in the photos. EI#1 said he could not identify them but it was two on duty staff members sleeping. EI#1 reported he had addressed sleeping on duty with the care associate identified by EI#3.</p> <p>Resident Care Needs Exceeded the Facility's Capability Resident Identifier (RI)#1 had resided at the facility since September 14, 2022. RI#1 was admitted to hospice on May 17, 2023. Refer to deficiencies 606 and 621 for additional information on RI#1.</p> <p>A Physical Self Maintenance Scale (PSMS), was completed for RI#1 on May 10, 2023, which documented a score of 5 in Feeding (does not feed self at all and resists efforts of others to feed him/her) which exceeds the score allowed in a SCALF. RI#1's total score on the PSMS, dated</p>	A 303		

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A 303	Continued From page 4  May 10, 2023, was 25 which exceeds the score allowed in a SCALF.  At the time of the survey on August 1, 2024, the Administrator had not issued a 30 day notice of discharge for RI#1. RI#1 had a PSMS score on May 10, 2023, that indicated a higher level of care was needed. The resident was admitted to hospice care on May 17, 2023.	A 303		
A 606	420-5-20-.06 (3) (g) Care of Residents.  (g) Services Beyond Capability of Specialty Care Assisted Living Facility. Whenever a resident requires hospitalization, medical, nursing, or other care beyond the capabilities of the specialty care assisted living facility, arrangements shall be made to discharge the resident to an appropriate setting, or to transfer the resident promptly to a hospital or other health care facility able to provide the appropriate level of care.  This Rule is not met as evidenced by: Based on observations, interviews and record review, the facility failed to make arrangements for discharge of a resident to an appropriate setting when the resident required a higher level of care than the SCALF could provide.  Findings:  On the morning of July 31, 2024, EI#2, LPN/Charge Nurse, said no 30 day notices of discharge had been issued.	A 606		

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A 606	<p>Continued From page 5</p> <p>RI#1 had resided at the facility since September 14, 2022. RI#1 was admitted with diagnoses to include Alzheimer's disease with early onset and hereditary and idiopathic neuropathy. Refer to deficiencies 303 and 621 for additional information on RI#1.</p> <p>RI#1 currently had a stage II wound to the coccyx as of July 25, 2024. According to EI#6, a Care Associate, staff assist the sitters for RI#1 in turning the resident every two hours. RI#1 was unable to turn or reposition themselves.</p> <p>A Physical Self Maintenance Scale (PSMS), was completed for RI#1 on May 10, 2023, which documented a score of 5 (five) in Feeding (does not feed self at all and resists efforts of others to feed him/her.) which exceeds the score allowed in a SCALF. RI#1's total score on the PSMS dated May 10, 2023, was 25 which exceeds the score allowed in a SCALF.</p> <p>The most recent PSMS completed for RI#1 on August 1, 2024, which documented a score of 5 (five) in Toileting (No control of bowels or bladder.); documented a score of 5 (five) in Feeding (does not feed self at all and resists efforts of others to feed him/her.); documented a score of 5 (five) in Grooming (Actively negates all efforts if others to maintain grooming.); documented a score of 5 (five) in Physical Ambulation (Bedridden more that half the time.); documented a score of 5 (five) in Bathing (Does not try to wash self, and resists efforts to keep him/her clean.) RI#1's total score on the PSMS dated August 1, 2024, was 29. Each of RI#1's scores listed exceed the score allowed in a SCALF.</p>	A 606		

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A 606	Continued From page 6  The comparison of the PSMS dated May 10, 2023, and the PSMS dated August 1, 2024, revealed a significant decline over the 15 months since RI#1 was identified as ineligible for the SCALF setting.  On the afternoon of August 1, 2024, EI#1 acknowledged he understood the failure.	A 606		
A 621	420-5-20-.06 (9) (b) Care of Residents.  (b) Retention.  1. A specialty care assisted living facility shall not allow any resident to return to the specialty care assisted living facility from a higher level of care if that resident requires care that exceeds the level of care the specialty care assisted living facility is licensed to provide or the facility is capable of providing.  2. A specialty care assisted living facility shall not retain a resident that has a PSMS score greater than 23 or a score of five in feeding, dressing, grooming, bathing or a score of four or five in physical ambulation.  3. A specialty care assisted living facility shall not retain a resident that has symptoms or behaviors that infringe on the rights or safety of residents currently in the facility.  4. Residents who have unmanageable behaviors or behaviors that may be dangerous to themselves or others shall not be retained in a specialty care assisted living facility.  5. A specialty care assisted living facility shall not retain a resident who requires medical	A 621		

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A 621	<p>Continued From page 7</p> <p>or skilled nursing care which is expected to exceed 90 days unless:</p> <p>(i) The individual is capable of performing and does perform all tasks related to his or her own care; OR</p> <p>(ii) The individual is incapable of performing some or all tasks related to his or her own care due to limitations of mobility or dexterity but the individual has sufficient cognitive ability to direct his or her own care and the individual is able to direct facility staff and does direct facility staff to provide the physical assistance needed to complete such tasks, and the facility staff is capable of providing such assistance and does provide such assistance. If the facility chooses to offer this assistance, the facility shall develop and implement a policy and procedure to ensure safe practices by facility staff.</p> <p>6. If a resident of a specialty care assisted living facility is diagnosed with a terminal illness and requires hospice care, the resident may be admitted to a properly licensed and certified hospice program. A resident receiving hospice care may remain in the facility beyond 90 days. If the facility is unable or becomes unable to meet the needs of a resident receiving hospice care, or if a resident receiving hospice care requires care beyond what the facility may lawfully provide pursuant to this section, then the facility shall promptly make arrangements to discharge or transfer the resident to a safe and appropriate placement in accordance with the discharge procedures and prearranged plan required by these rules for specialty care assisted living facilities.</p>	A 621		

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A 621	<p>Continued From page 8</p> <p>The facility would in all cases remain responsible for ensuring the appropriate delivery of care and must take all necessary steps to ensure that care needed by a resident is delivered to the resident.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility retained a resident whose PSMS score exceeded the score allowed for continued stay in a SCALF.</p> <p>Findings:</p> <p>RI#1 had resided at the facility since September 14, 2022. RI#1 was admitted to hospice on May 17, 2023. Refer to deficiencies 303 and 606 for additional information on RI#1.</p> <p>A Physical Self Maintenance Scale (PSMS), was completed for RI#1 on May 10, 2023, which documented a score of 5 (five) in Feeding (does not feed self at all and resists efforts of others to feed him/her) which exceeded the score allowed in a SCALF. RI#1's total score on the PSMS, dated May 10, 2023, was 25 which exceeded the score allowed in a SCALF.</p> <p>On the afternoon of August 1, 2024, EI#2 said RI#1's PSMS prior to being admitted to hospice May 17, 2023, was completed on May 10, 2023 with a total score of 25. EI#2 added RI#1 was still ambulatory in May of 2023 when asked why RI#1 was not discharged.</p> <p>On the afternoon of August 1, 2024, EI#1 acknowledged he knew the rule regarding</p>	A 621		

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A 621	Continued From page 9 retention and understood the failure.	A 621		
A 702	<p>420-5-20-.07 (2) Food Service.</p> <p>(2) Food Handling Procedures.</p> <p>(a) Dish and Utensils Washing, Disinfection, and Storage.</p> <p>1. Wash water shall be changed with sufficient frequency to avoid gross contamination, and final rinse water shall be kept clean and clear.</p> <p>2. Hand washed repeated service and multi-service utensils and dishes, after washing and rinsing, shall be sanitized by either of the following methods:</p> <p>(i) Utensils and dishes shall be completely immersed for a period of not less than 30 seconds in water that is at least 171 degrees Fahrenheit (pouring scalding water over utensils and dishes does not meet this requirement); or</p> <p>(ii) A cold water sanitizer: A sanitizing solution shall be used in accordance with the manufacturers' instructions. Utensils and dishes shall be completely immersed for a period of not less than 10 seconds in a clean solution containing not less than 50 ppm, and not more than 200 ppm, of available chlorine bleach or its equivalent or 30 seconds 12.5 ppm of iodine or the amount of time specified by the manufacturer in a 200 ppm quaternary ammonium solution. Water temperature must be at least 75 degrees Fahrenheit. Water temperatures and chemical concentrations shall be monitored and documented prior to dishwashing. A record of</p>	A 702		

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A 702	<p>Continued From page 10</p> <p>each test shall be maintained for at least three months.</p> <p>3. Dishes and utensils shall be allowed to air dry.</p> <p>4. After washing, rinsing, sanitizing, and air-drying, all repeated use service ware (utensils and dishes) shall be stored in a clean, dry place that is protected from pests, dust, splash, and other contaminants. Utensils shall be handled in such a way as to prevent contamination from hands and clothing.</p> <p>5. The results from the use of dishwashing machines shall be equivalent to those obtained from the method outlined above, as documented in material provided from the manufacturer and kept on file at the facility.</p> <p>(b) Ice. Crushed or chipped ice shall be protected from splash, drip, and hand contamination during storage and service. The ice scoop shall be stored in a holder inside the ice bin in a manner to prevent ice from coming into contact with the handle, or it may be stored in an airtight container outside the ice bin.</p> <p>(c) Protection of Food from Contamination.</p> <p>1. Food and food ingredients shall be stored, handled, and served so as to be protected from pests, dust, rodents, droplet infection, unsanitary handling, overhead leakage, sewage backflow, and any other contamination. Sugar, syrup, and condiment receptacles shall be provided with lids and shall be kept covered when not in use.</p>	A 702		

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A 702	<p>Continued From page 11</p> <p>2. Medications, biologicals, poisons, detergents, and cleaning supplies shall not be kept in the refrigerator nor in other areas used for storage of food.</p> <p>3. Food shall not be stored on the floor. All food and food ingredients stored on shelving must be placed on shelving that is at least six inches above the floor.</p> <p>4. Refrigerators shall maintain a maximum temperature of 41 degrees Fahrenheit. Freezers shall maintain at a maximum temperature of 0 degrees Fahrenheit. Thermometers shall remain in refrigerators and freezers at all times.</p> <p>5. All leftover foods shall be labeled and dated with a "use by date," so that it may be consumed or discarded by that date, which is no more than three days from the date it was prepared.</p> <p>6. All food products shall be used by the manufacturer's indicated date or discarded.</p> <p>7. Food shall be prepared either in the licensed facility or another location even when that location is not part of the licensed facility. All food preparation areas used by the facility shall be subject to the same inspections as though part of the licensed facility. The licensed facility is responsible to ensure adequate equipment and measures are used so that food is not contaminated in transport and foods that are transported are held and served at the appropriate temperature at all times.</p>	A 702		

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A 702	<p>Continued From page 12</p> <p>8. Hot food shall be maintained at a minimum temperature of 135 degrees Fahrenheit and cold foods at a maximum temperature of 41 degrees Fahrenheit.</p> <p>9. Frozen food items (raw and cooked) shall be thawed under refrigeration or under running water prior to preparation. Frozen food may also be thawed as part of the cooking process when indicated by package directions. Raw meats shall be stored below and away from vegetables, fruits, and other foods to prevent contamination (meat juices dripping on other foods).</p> <p>10. Laundry shall not be brought through the food preparation or service area.</p> <p>(d) Storage and Service of Milk and Ice Cream.</p> <p>1. Milk and fluid milk products shall be served only from the original containers in which they were received from the distributor. This shall not apply to cream for coffee, cereals, and milk for milk drinks which may be dispensed from a readily cleanable container approved for such use.</p> <p>2. Milk and fluid milk products shall be stored in such a manner that bottles or containers from which the milk or milk product is to be poured or drunk will not become contaminated from drip or contact with foods. Milk shall be maintained and stored at a maximum temperature of 41 degrees Fahrenheit and shall not be served at a temperature warmer than 45 degrees Fahrenheit unless specifically requested to be served at a warmer temperature by a</p>	A 702		

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NAME OF PROVIDER OR SUPPLIER  <b>WESLEY GARDENS RETIREMENT CENTER - SPECIAL</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1555 TAYLOR ROAD MONTGOMERY, AL 36117</b>
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A 702	<p>Continued From page 13</p> <p>resident.</p> <p>3. Contaminating substances shall not be stored with or over open containers of ice cream. Ice cream dippers, spatulas, and other serving utensils shall be cleaned between uses.</p> <p>(e) Kitchen Garbage and Trash Handling.</p> <p>1. Kitchen garbage and trash shall be placed in suitable containers with tight-fitting lids and properly stored pending removal. Kitchen garbage and trash shall not be allowed to accumulate in the kitchen and shall be removed from the premises at frequent intervals.</p> <p>2. After being emptied, all garbage cans and trash cans shall be washed and dried before reuse.</p> <p>(f) Employees' Cleanliness.</p> <p>1. Employees engaged in the handling, preparation, and serving of food shall wear clean clothing at all times. Employees shall wear hair restraints, for example, hairnets, headbands, caps, or other adequate means to prevent contamination of food from hair. Employees whose duties include contact with residents shall change clothing or wear a clean covering over clothing before handling, preparing, or serving food.</p> <p>2. Employees handling food shall wash their hands thoroughly before starting work each day, immediately after contact with any soiled matter, and before returning to work after each visit to the rest room.</p>	A 702		

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A 702	<p>Continued From page 14</p> <p>3. Street clothing not worn by the employee shall be stored in lockers, dressing rooms, or closets designated for staff use.</p> <p>(g) Live Fowl or Animals. Live fowl or animals shall not be allowed in the food service area.</p> <p>(h) Smoking and Spitting. Smoking, other use of tobacco products, and spitting within the food service area shall be prohibited for all staff, residents, and visitors.</p> <p>(i) Dining in Kitchen. Dining in the kitchen shall not be permitted in Congregate assisted living facilities.</p> <p>(j) Paper for Food Wrapping. Only new paper, foil, or plastic wrap shall be used for wrapping of foods.</p> <p>(k) Laundering of clothing shall not be permitted in food preparation or service areas.</p> <p>This Rule is not met as evidenced by: Based on observations and interview, the facility failed to properly label and date food items stored in the cooler. Also, the facility failed to prevent the potential for cross contamination of foods stored in the ice cream freezer.</p> <p>Findings:</p> <p>On the morning of August 1, 2024, an observation was made with EI#7, the Dietary Manager, of a partially used onion, a bowl of mandarin orange sections and a bag of muffins in the cooler with</p>	A 702		

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A 702	Continued From page 15  no label and use by date. An observation of the ice cream freezer revealed three (3) partially used bottles of water lying in the bin with ice cream served to residents. El#7 removed the bottles and said they belonged to staff.	A 702		
A 703	420-5-20-.07 (3) Food Service.  (3) Dietary Service.  (a) Number of Meals. No fewer than three meals shall be provided each 24 hours. Food service shall be provided in a resident's room during temporary illness if necessary. The diet shall be well-balanced, palatable, properly prepared, and sufficient in quantity and quality to meet the nutritional needs of the residents in accordance with Dietary Reference Intakes of the Food and Nutrition Board of the National Research Council, National Academy of Sciences. The food must be adapted in type and preparation to the habits, preferences, and physical abilities of the residents.  (b) Timing of Meals. A time schedule for serving meals to residents and personnel shall be established. Meals shall be served approximately five hours apart with no more than 14 hours between the evening meal and breakfast. The time schedule of meals shall be posted with the menu. The facility shall make evening snacks available after service of the evening meal. The facility shall provide fluids throughout the day and shall make between-meal nourishment (snacks) available.  (c) Menu. The menu shall be planned and written at least 1 week in advance. The	A 703		

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A 703	<p>Continued From page 16</p> <p>current week's menu shall be posted in the food service area and shall be kept on file for the following 2 weeks. For any resident with a physician's order for a therapeutic diet, the facility shall have a copy of the diet and the facility shall document the adjustment of its menu to accommodate the resident's needs.</p> <p>(d) Alternate food selections or substitutes shall be made available to all residents.</p> <p>(e) A facility shall not obtain food from charitable organizations. A facility shall not avoid serving a meal by sending or transporting residents to missions, soup kitchens, or other charitable facilities for meals.</p> <p>(f) The amount of food on hand shall be sufficient to serve three meals per day to all residents for 3 days. Non-perishable food and potable water shall be maintained in the facility in sufficient quantity to serve three meals per day to all residents for 3 days.</p> <p>This Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to ensure a three day emergency supply of non-perishable food was on hand.</p> <p>Findings:</p> <p>On the morning of August 1, 2024, a list was provided titled, "Emergency Food Stock." This list included the statement, "... Wesley Gardens will keep in stock a 3 (three) day supply of Shelf Stable Items for use during an Emergency</p>	A 703		

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A 703	Continued From page 17  Disaster Situation ..." The only items listed were Applesauce, Tuna, Tomato Soup, Chicken and Rice Soup, Vegetable Cases of Water. This list would not accommodate three meals a day for the resident population.  An observation was made of the facility's emergency food supply with EI#7. EI#7 said no breakfast foods were stocked and the emergency supply was not fully stocked.	A 703		
A 804	420-5-20-.08 (4) Physical Facilities.  (4) Food Service Facilities.  (a) Floors. Floors in food service areas shall be of such construction as to be easily cleaned, sound, smooth, non-absorbent, without cracks or crevices, and shall be provided with approved and conveniently located facilities for the disposal of floor wash water.  (b) Walls and Ceilings. Walls and ceilings of food service areas shall be of tight and substantial construction, and smoothly finished. The walls and ceilings shall be without horizontal ledges and shall be washable up to the highest level reached by splash and spray. Roofs and walls shall be maintained free of leaks. All openings to the exterior shall be provided with doors or windows, which prevent the entrance of rain or dust during inclement weather.  (c) Screens or Outside Openings. Openings to the outside shall be effectively screened, or suitable provisions made equal to screening (such as fly fans). Screen doors shall be equipped with self-closing devices.	A 804		

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A 804	<p>Continued From page 18</p> <p>(d) Lighting. The kitchen, dishwashing area, and the dining room shall have adequate light.</p> <p>(e) Ventilation. Vent/exhaust hoods, vented to the outdoors, shall be provided over cooking surfaces to aid in removing cooking odors. Group homes with residential stoves may use a residential hood sized for the stove. Commercial exhaust hoods shall be installed when commercial cooking equipment is used. Congregate facilities shall use a commercial exhaust hood system.</p> <p>(f) Employee Toilet Facilities. Toilet rooms, if provided, shall not open directly into any room or space in which food is prepared, stored, displayed, or served, nor into any room in which utensils are washed or stored. Toilet rooms shall include a lavatory with a soap dispenser and disposable towels, and shall be well lighted and ventilated.</p> <p>(g) Hand washing Facilities. Each Group and Congregate specialty care assisted living facility shall provide a hand washing lavatory in the kitchens which shall be equipped with a soap dispenser and a supply of soap, disposable towels, and hot and cold running water through a mixing valve or combination faucet. The use of a common towel and common bar soap is prohibited. Hands shall not be washed in sinks where food is prepared.</p> <p>(h) Refrigeration Facilities. Adequate refrigeration facilities, automatic in operation for the storage of perishable foods, shall be provided Refrigeration shall be maintained at 41 degrees Fahrenheit or less. All refrigerators shall be</p>	A 804		

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A 804	<p>Continued From page 19</p> <p>provided with thermometers. All refrigerators shall be kept clean.</p> <p>(i) Equipment and Utensil Construction. Equipment and utensils, except single service utensils, shall be so constructed as to be easily cleaned and shall be kept in good repair. No cadmium plated, lead, or readily corrodible utensils or equipment shall be used.</p> <p>(j) Separation of Kitchen from Resident Rooms and Sleeping Quarters. Any room used for sleeping quarters shall be separated from the food service area by a solid wall with no direct openings. Sleeping accommodations shall not be permitted within the food service area.</p> <p>(k) Clean Rooms. Floors, walls, and ceilings of rooms in the food service area shall be clean and free of an accumulation of rubbish, dust, grease, dirt, etc.</p> <p>(l) Clean Equipment. Equipment in the food service area shall be clean and free of dust, grease, dirt, etc.</p> <p>(m) Clean Counters, Tables, Tablecloths, and Napkins. Tables and counters, which are used for food service, shall be kept clean. Tablecloths and cloth napkins shall be laundered after each use.</p> <p>(n) Location and Space Requirements. Food service facilities shall be located in a specifically designated area and shall include the following rooms and space: kitchen, dishwashing, food storage, and dining room.</p> <p>(o) Equipment. Minimum equipment in</p>	A 804		

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A 804	<p>Continued From page 20</p> <p>the kitchen shall include the following:</p> <ol style="list-style-type: none"> <li>1. Range. In a Group specialty care assisted living facility, a residential use range is permitted. A Congregate specialty care assisted living facility shall have a heavy duty range suitable for institutional use with double oven, or equivalent.</li> <li>2. Refrigerator. A Group specialty care assisted living facility may use a residential refrigerator. A Congregate specialty care assisted living facility shall have a heavy-duty refrigerator suitable for institutional use.</li> <li>3. Fire extinguisher. Five-pound type BC for residential hoods and K type for commercial hoods.</li> <li>4. Dishwashing. The dishwashing equipment for Group assisted living facilities shall be either residential type using cold water sanitizers or commercial type with a booster water heater. Dishwashing equipment for all Congregate assisted living facilities shall be commercial type using a booster water heater or an automatic dispensing sanitizing chemical system.</li> <li>5. A three-compartment sink with a booster heater or chemical sanitizing system for the third compartment shall be provided in Congregate assisted living facilities.</li> <li>6. Garbage cans with cover.</li> </ol> <p>(p) Food Storage. A well-ventilated, cool food storage room, pantry, or cabinets shall be provided. Adequate shelving, bins, suitable cans,</p>	A 804		

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A 804	<p>Continued From page 21</p> <p>and raised platforms shall be provided and kept clean. Perishable food shall be stored at least six inches above the floor. The storeroom shall be of such construction as to prevent the invasion of rodents and insects, the seepage of dust and water, leakage, or any other source of contamination.</p> <p>(q) Dining Room.</p> <p>1. A resident dining room, or rooms, shall be provided which is large enough to seat not less than 100 percent of the bed capacity.</p> <p>(r) Water Heating Equipment. Equipment for heating an ample supply of water, under pressure, for all washing purposes shall be provided. Hot water shall be piped to all hand-washing facilities, and to each compartment of all dishwashing and laundry sinks. Water heaters shall be of the automatic type.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to ensure a heavy accumulation of dust and dirt like particles were not observed with the potential to contaminate food or clean dishes. Also, the facility failed to ensure kitchen equipment was maintained to be free of dust, grease, and dirt.</p> <p>Findings:</p> <p>On the morning of August 1, 2024, an observation</p>	A 804		

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A 804	<p>Continued From page 22</p> <p>was made of the kitchen with EI#7. Two air conditioner return ducts were in the ceiling above the clean dishes. Both ducts and the adjacent wall had a heavy accumulation of dust like particles hanging above clean dishes. The outside of the vent-hood above the stove and the front of the cooler across from the stove had heavy accumulation of dust like particles as well as the air conditioner vent above the stove and cooler. EI#1 had joined the tour and voiced the Dietitian had pointed this issue out prior to the survey. As the tour continued EI#7 observed with the surveyor two convection ovens with a very heavy accumulation of burnt food in the bottom floor of each oven. When asked, EI#7 said, "That's burnt food." A industrial sized mixer was observed with an accumulation of what appeared to be grease with dust stuck to it. This was observed over the bowl that would contain food fed to residents. EI#7 was asked to wipe across the area. His finger had dust or dirt visible. EI#7 said, "That will be wiped down today."</p> <p>THERESA HARRISON, REGISTERED NURSE</p>	A 804		