

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155845	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 03/23/2023
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NAME OF PROVIDER OR SUPPLIER  SIMMONS LOVING CARE HEALTH FACILITY	STREET ADDRESS, CITY, STATE, ZIP CODE 700 E 21ST AVE GARY, IN 46407
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCY (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
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F 0000  Bldg. 00	<p>This visit was for the Investigation of Complaint IN00404677.</p> <p>Complaint IN00404677 - Federal/state deficiencies related to the allegations are cited at F812.</p> <p>Survey date: 3/23/23</p> <p>Facility number: 000368 Provider number: 155845 AIM number: 100275220</p> <p>Census Bed Type: SNF/NF: 23 Total: 23</p> <p>Census Payor Type: Medicaid: 20 Other: 3 Total: 23</p> <p>These deficiency reflects State Findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>Quality review completed on 3/24/23.</p>	F 0000		
F 0812 SS=F Bldg. 00	<p>483.60(i)(1)(2) Food Procurement,Store/Prepare/Serve-Sanitary §483.60(i) Food safety requirements. The facility must -</p> <p>§483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities. (i) This may include food items obtained directly from local producers, subject to</p>			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
RAENITA DUMAS	RNDON	05/05/2023

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 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 disclosed 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.

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	<p>applicable State and local laws or regulations.</p> <p>(ii) This provision does not prohibit or prevent facilities from using produce grown in facility gardens, subject to compliance with applicable safe growing and food-handling practices.</p> <p>(iii) This provision does not preclude residents from consuming foods not procured by the facility.</p> <p>§483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety.</p> <p>Based on observation, record review, and interview, the facility failed to serve, store, and prepare food under sanitary conditions related to mouse droppings, crumbs, and debris, spilled fluid, and scoops/spoons stored in dried food containers, for 1 of 1 kitchens, potentially affecting 23 of 23 residents who receive their meals from the kitchen. (The Main Kitchen)</p> <p>Findings include:</p> <p>1. During an observation of the kitchen on 3/23/23 at 11:45 a.m. with Cook 1 the following was observed:</p> <p>a. There were mouse droppings and a large amount of crumbs/ debris under the stove.</p> <p>b. There were crumbs/ debris on the floor under the prep table/serving counter.</p> <p>c. There were mouse droppings and a large amount of crumbs/ debris under the sink and counter along the back wall.</p>	F 0812	<p><b>F812</b></p> <p><b>Corrective Action(s) for Residents Affected by the Deficient Practice</b></p> <p>No specific residents were cited. The debris was removed from under the stove and the prep area/serving counter. The debris was removed from under the sink and counter along the back wall. The non-functioning mouse trap was removed, and all other mouse traps have bait on load. The spoons and small bowl were removed from the dried food storage containers. The scoops were removed from the rice, oatmeal, and flour brutes in the basement dry storage area. The liquid spillage was removed from the shelf. The crumbs were removed from under the refrigerator. The floor under freezer 1 and freezer 2 was cleaned. The area under the blender bases in the back corner of the prep</p>	04/01/2023
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	<p>d. There were six mouse traps located under the sink and counter area along the back wall. One of the six traps was opened and was not functioning.</p> <p>e. The dry foods of rice, flour, and thickener were stored in a sealed plastic container. There were spoons and a small bowl kept inside the containers in the dried food for scooping out the dried food.</p> <p>2. During an observation of the dry storage area located in the basement on 3/23/23 at 11:54 a.m. with the Executive Secretary, the following was observed:</p> <p>a. There were four brutes (large plastic containers), which were labeled flour, grits, oats, and rice. The scoops had been left in the rice, oatmeal, and flour.</p> <p>b. There was a yellow/orange colored sticky liquid spilled on the shelf.</p> <p>c. There were crumbs under the refrigerator.</p> <p>d. There was a mouse dropping behind the freezer identified as freezer 1.</p> <p>e. There was paper, debris, and a knife on the floor behind the freezer identified as freezer 2.</p> <p>3. The kitchen was again observed on 3/23/23 at 12:06 p.m. with Maintenance 2 and the same concerns were found under the prep/serving counter, under the stove, and under the sink/counter area.</p> <p>Maintenance 2 indicated during the observations, the mouse traps were to be checked every other day by whoever was on custodial duty. There was</p>		<p>counter was cleaned.</p> <p><b>Corrective Action(s) for Other Residents Potentially Affected</b> All residents have the potential to be affected. The kitchen and all food storage areas have been thoroughly cleaned.</p> <p><b>Measures to Ensure the Deficient Practice Does Not Recur</b> The Administrator or designee will re-educate new kitchen staff on kitchen sanitation and on communicating signs of insects or vermin infestation to their supervisor. Sanitation checklists have been reviewed and revised as deemed necessary. The contracted exterminator service will continue to treat the facility one time per month or more frequently as per required need.</p> <p><b>The Monitoring Process to Ensure the Deficient Practice Does Not Recur</b> The Administrator or designee will be responsible for monitoring kitchen sanitation by completing sanitation rounds in the kitchen and food storage areas two times weekly for four weeks, 1 time weekly for four weeks, and once per month for three months. The results will be documented on kitchen sanitation audit forms. Any concerns identified through the audits will be addressed by administrative staff with a written</p>	

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	<p>no written log of when traps were checked and areas were inspected for pests or the findings of the checks. He indicated they had not found mice in the traps. He acknowledged the mouse droppings under the stove and indicated if bugs and/or mice were seen, he sprayed and then the exterminator was notified to come to the facility.</p> <p>The area under the sink/prep area was observed and Maintenance 2 indicated he could not acknowledge if mouse droppings were seen, as he was not wearing his glasses.</p> <p>A mouse dropping was seen on the back corner of the sink/prep area counter where two blender bases were stored and there was a yellowish liquid substance that had been spilled and dried on the counter.</p> <p>Cook 1 indicated at the time of the observation, the kitchen was to be cleaned before and after each shift. He was the only one in the kitchen at this time and had not had time to clean.</p> <p>Maintenance 2 then swept a large amount of debris/crumbs/droppings out from under the sink/counter area. He checked the mouse traps and three of the traps had no bait as directed, and one trap was open and would not be functional.</p> <p>During an interview on 3/23/23 at 1:27 p.m., the Director of Nursing (DON) indicated Pest Control comes to the facility monthly and last month she had seen mouse droppings and she had them come out for an extra visit. The Administrator indicated she had found the scoops in the dry ingredients prior and had informed the staff they could not be stored inside the containers.</p> <p>An undated facility policy for pest and rodent</p>		<p>plan; the plan will be submitted to the QAPI committee for review. Further corrective actions will be developed and implemented as deemed necessary.</p> <p><b>DATE 4/1/23</b></p>	

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

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FORM APPROVED

OMB NO. 0938-039

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	<p>control, received from the DON on 3/23/23 at 3:15 p.m., indicated an exterminating company would come to the facility monthly and would spray and inspect for pests and rodents. The facility would monitor for the effectiveness of the services. The custodial staff would monitor monthly for signs of insects and rodent droppings monthly.</p> <p>An undated facility policy for cleaning the kitchen, received from the DON on 3/23/23 at 3:15 p.m., indicated all equipment, food contact surfaces and utensils would be cleaned whenever contamination may have occurred. All food surfaces would be cleaned at the end of each food preparation session. The floor was to be cleaned daily.</p> <p>A sign, received from the DON on 3/23/23 at 3:15 p.m., indicated the scoops were to be removed from the dry storage containers.</p> <p>This Federal tag relates to Complaint IN00404677.</p> <p>3.1-21(i)(3)</p>			