

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

PRINTED: 05/30/2024

FORM APPROVED

OMB NO. 0938-039

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER 155173		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 05/09/2024	
NAME OF PROVIDER OR SUPPLIER MILLER'S MERRY MANOR				STREET ADDRESS, CITY, STATE, ZIP COD 505 N BRADNER AVE MARION, IN 46952			
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F 0000 Bldg. 00	<p>This visit was for the Investigation of Complaints IN00433993 and IN00434045.</p> <p>Complaint IN00433993 - Federal/state deficiencies related to the allegations are cited at F812.</p> <p>Complaint IN00434045 - No deficiencies related to the allegations are cited.</p> <p>Survey date: May 9, 2024.</p> <p>Facility number: 000089 Provider number: 155173 AIM number: 100287760</p> <p>Census Bed Type: SNF/NF: 64 SNF: 3 Total: 67</p> <p>Census Payor Type: Medicare: 6 Medicaid: 50 Other: 11 Total: 67</p> <p>These deficiencies reflect State Findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>Quality review completed May 16, 2024.</p>			F 0000	<p>May 29, 2024</p> <p>Indiana State Department of Health Division of Long-Term Care, Section 4 B 2 North Meridian Street Indianapolis, Indiana 46204</p> <p>To Whom it May Concern: A Complaint Survey was conducted at Miller's Merry Manor of Marion on May 9, 2024. Please find the enclosed Plan of Correction being submitted as remedies to the deficiencies that were found during our survey. All systemic changes and education will be completed by May 29, 2024.</p> <p>With regards to our Plan of Correction from the May 9, 2024 Complaint Survey we hope that you will find our remedies both sufficient and thoroughly explained in providing a clear picture of how we corrected these concerns. We respectfully request <i>paper compliance</i> for this plan of correction for this F Tags. All areas have been corrected, none of which were actual harm to any residents.</p> <p>We will continue to abide by our plan of correction as indicated, and will continue to monitor, through audits and correct any</p>		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Paula Juday

Administrator

05/29/2024

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 disclosable 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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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 applicable State and local laws or regulations. (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. (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. Based on observation, interview, and record review, the facility failed to ensure food was stored in a sanitary manner regarding dating and labeling foods, and failed to ensure the kitchen</p>	F 0812	<p>future areas of concern per our plan of correction. If you have any questions or require additional information, please contact me at 765 662 3981 Thank you. Sincerely, Paula Juday, HFA, LMSW</p> <p>F 812 Food Procurement, Store / Prepare/ Serve – Sanitary Conditions</p>	05/29/2024	

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	<p>and equipment was maintained in a sanitary manner. This deficient practice had the potential to impact 66 residents who received meals prepared in the kitchen of 67 in the facility.</p> <p>Findings include:</p> <p>During a kitchen tour, accompanied by Dietary Aide 8, on 5/9/24 at 8:56 a.m., the following was observed:</p> <p>a. The walk-in refrigerator had undated and unlabeled foods as follows: a piece of meat in a tin pan, identified by the Dietary Aide as Salisbury steak, eight dessert cups contained honey dew melon, a dessert cup with a sliced tomato and sliced onion, a clear container with a green lid that contained a tan colored liquid identified by the Dietary Aide as chicken noodle soup, three foam cups contained sliced onion, sliced pickle and sliced tomato in each cup, four dessert cups contained mixed fruit, one dessert cup contained a brown and white substance identified by the Dietary Aide as chocolate pudding with whipped cream, a large tin pan contained bacon, three carafes of a red liquid identified by the Dietary Aide as cranberry juice, three pitchers of another red liquid identified by the Dietary Aide as fruit punch, three pitchers of yellow liquid identified by the Dietary Aide as lemonade, and three pitchers of a dark purple liquid identified by the Dietary Aide as grape juice.</p> <p>b. Near the stove, a serving tray on the bottom shelf of a wheeled cart contained 25 upside-down sugar condiment holders splattered with a brown and orange substance and with dark and light brown food crumbs. Dietary Aide 8 indicated the carts were for clean dishes, pans, and mixing bowls. Cook 5 approached the cart and indicated</p>				<p>What corrective action will be accomplished for those residents found to have been affected by the deficient practice?</p> <p>It is the Policy of Miller's Merry Manor that all foods shall be stored and protected under safe and sanitary conditions. (Attachment A)</p> <p>No residents were affected by this deficient practice. In order to correct this deficient practice, the following corrections were made:</p> <p>Kitchen Tour:</p> <p>(a) Unlabeled / Dated items- all identified undated items were disposed of (5/9/2024)</p> <p>(b) Shelving unit near stove – all items were removed, shelves were cleaned, and shelving unit was removed (5/28/2024)</p> <p>(c) Trash can labeled "Coffee grounds only" was removed from the kitchen and disposed of (5/9/24)</p> <p>(d) Trash can near cart warmer was cleaned (5/10/24)</p> <p>(e) Large bin of oatmeal was disposed of, cleaned, filled with new oatmeal and labeled and dated (5/10/2024)</p> <p>(f) Stove was deep cleaned (5/28/2024)</p> <p>(g) Trash can under prep table was removed from kitchen (5/27/2024)</p> <p>(h) Nozzles to coffee machine were deep cleaned (5/10/2024)</p>		

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	<p>the dishes were dirty and removed them. The shelving unit to the left contained mixing bowls right-side up, with a dried brown liquid inside of them, a right-side up muffin pan with crumbs in it, two face-down medium sized steam table lids, and two face-up small steam table lids with brown food crumbs on them.</p> <p>c. The top of trash can lid, located under a non-operating sink, was labeled "Coffee grounds only!" When the lid was lifted, multiple small flies flew from inside of the trash can. Dietary Aide 8 indicated there were a lot of flies that had flown from the trash can and it needed to be emptied.</p> <p>d. Against the front of the cart warmer, a trash container with clean plates inside had a black substance across the entire lid. A gray substance had dripped down both sides of the trash can. A red/orange substance the size of a quarter was splattered on the left side of the trash can. In the grooves of the foot pedal to the trash can was brown debris and food crumbs.</p> <p>e. Under the prep table, was a large bin of bulk oatmeal. The container was not labeled or dated. Dietary Aide 8 indicated if the food was not in the original package, it should be labeled and dated.</p> <p>f. The back splash to the gas stove had black/brown substance splattered on it. Four of the six burners had a thick black burnt residue, and two of the six burners had brown food debris and brown food crumbs around them. The foil tray located under the burners had thick brown/ black burnt food residue with dark brown and light brown food crumbs scattered over the foil. Some of the food crumbs were identified by Dietary Aide 8 as potato pearls. Cook 5 approached the stove and removed the old foil. The tray under the</p>				<p>Dry Storage Observation:</p> <p>(a) Brown sugar was disposed of (5/10/2024) and new container was labeled and dated</p> <p>(b) White sugar was disposed of (5/10/2024) and new container was labeled and dated</p> <p>(c) Powdered sugar was disposed of (5/10/2024) and new container was labeled and dated</p> <p>(d) Powdered drinks were disposed of (5/10/2024) and new container was labeled and dated</p> <p>(e) Floors were scrubbed utilizing a floor scrubber to remove debris (5/23/2024) and all carts were power washed, including the wheels of the carts (5/23/2024)</p> <p>Service Area:</p> <p>(a) All cabinets were washed and the white substance was removed (5/9/2024)</p> <p>(b) Thickener was disposed of and replaced with a new container of thickener that was labeled and dated (5/9/2024)</p> <p>(c) Hot chocolate was disposed of and replaced with a new container of hot chocolate that was labeled and dated (5/9/24)</p> <p>(d) Bag with cleaning sponge was removed and disposed of (5/9/2024)</p> <p>(e) Open concept rack – rodent traps were disposed of, broken glass was removed and disposed of, and the cabinet was</p>		

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	<p>foil had brown/black build up with light brown and dark brown potato pearls and crumbs scattered across the entire foil tray. Cook 5 indicated they were supposed to clean the foil tray every two to three days.</p> <p>g. The trash can under the prep table had a brown substance on it. Dietary Aide 8 indicated it was sticky and greasy.</p> <p>h. The nozzles to the coffee machine (where the coffee basket attached to the coffee maker) was splattered with a black substance. Dietary Aide 8 ran a finger across the nozzle, resulting in a thick black substance being removed. She indicated she was not sure when they were cleaned last.</p> <p>The following was observed in the dry storage room:</p> <p>a. An unlabeled and undated clear container contained a brown substance, identified by Dietary Aide 8 as brown sugar.</p> <p>b. A clear container, labeled with a use-by date of 11/30/22, contained a white substance identified by Dietary Aide 8 as white sugar.</p> <p>c. A white container with a clear lid contained a white powdered substance identified by Dietary Aide 8 as powdered sugar had three black/gray specks in it. Dietary Aide 8 indicated the powdered sugar had not been used in a long time. She wasn't sure what the three black specks were.</p> <p>d. Located second from the top shelf were clear containers with powdered drinks packaged in aluminum type foil with no expiration dates on them. On the container with four grape drink packages was a sticker with the prepared date of</p>				<p>cleaned (5/9/2024)</p> <p>Kitchenette (Memory Care):</p> <p>(a) Refrigerator was cleaned and all contents were disposed of (5/10/2024)</p> <p>Kitchen Follow up-visit:</p> <p>All dietary staff were educated regarding the following policies and procedures: "Food Protection and Storage," "Dietary Sanitation," and "Personal Hygiene" including the appropriate use of hair nets. (5/10/2024) (Attachment A)</p> <p>How other residents having the potential to be affected by the same deficient practice will be identified and what corrective actions will be taken:</p> <p>All residents residing in facility had the potential to be affected by the alleged deficient practice. No residents were affected by this deficient practice.</p> <p>100% audit completed of all items in the kitchen for labels and dating of items. All items without label and / or date were disposed of and items were replaced with new items, placed in labeled containers, and dated. (5/10/2024).</p> <p>100% audit of all of kitchen for compliance with sanitation. All items not in clean, working order were removed from kitchen. All shelves, cabinets, carts, dishes, and appliances were cleaned (by</p>		

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	<p>10/19/23, a container with 12 orange drink packages was a sticker with the prepared date crossed out and the use by date was 2/8/24, a container with six lemonade drink packages the prepared date was crossed out and the use by date was 4/5/24. a container with four prune drink packages, the prepared date was crossed out and the use by date was 1/6/24. Dietary Aide 8 indicated the packages did not have an expiration date on them. Staff refilled the containers and that was not the true use by date.</p> <p>e. There was scattered brown, black, and white debris on the entire floor of the kitchen from the dry storage room, between the prep area and stove, to the steam tables. There was a thick black grime built up under the wheels of the carts near the stove.</p> <p>Dietary Aide 8 provided two schedules for the month of May 2024 and the following areas were to be cleaned on a daily basis and included the following: label and date, garbage can lids, stove, sweep and mop. One of the schedules indicated the last time the items were cleaned was 5/5/24.</p> <p>The following was observed in the service area, between the kitchen and the dining room:</p> <p>a. A white substance was splattered across three of the four doors of the cabinets, from the countertop ice bath cooler, across the cereal cabinet doors to the cabinet door where linens were stored. In the cereal cabinet there were bran flakes, corn flakes, and cheerios scattered across the bottom of the cabinet. Dietary Aide 8 scratched the white substance with her fingernail and indicated she was not sure what the substance was.</p>				<p>5/28/2024). Floors were scrubbed and buffed using power scrubber (5/23/2024). New refrigerator for Memory Care kitchenette was ordered (5/22/2024) and replaced (5/29/24). Cleaning schedules were reviewed and updated by the Dietary Manager on 5/9/2024. Dietary manager was educated by Administrator of the use of the "Quality Assessment / Improvement Program for Kitchen Sanitation – Food Procurement – Store, Prepare, Serve" and the "Quality Improvement Program DIETARY FOOD SAFETY SANITATION CHECKLIST" that will be utilized to ensure compliance with this deficient practice. (5/21/2024) (Attachment B).</p> <p>What measures will be put into place and what systemic changes will be made to ensure that the deficient practice does not recur All dietary staff were educated regarding policy and procedure of "Food Protection and Storage" and "Dietary Sanitation" and "Personal Hygiene" on 5/10/2024 (Attachment A). All dietary staff were educated regarding cleaning schedules on 5/10/2024.</p>		

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	<p>b. A clear container with a white powder, half covered with plastic wrap, identified by Dietary Aide 8 as thickener for liquids was not labeled or dated.</p> <p>c. A clear container with a brown powder identified by Dietary Aide 8 as hot chocolate was not labeled or dated.</p> <p>d. Under the freeze bar, there was an open concept cabinet containing a clear bag with a brown substance covering the entire bag and the bottom of the cabinet. As Dietary Aide 8 removed the bag from the bottom of the cabinet, it stuck. When it was removed, the Dietary Aide indicated there was a cleaning sponge inside the bag.</p> <p>e. An open concept rack built into the cabinet contained clean glasses in the racks. On the bottom of the cabinet was the top of a rodent trap turned on its side and exposed two metal flip rodent traps. There was brown debris scattered on the bottom of the cabinet and a broken piece of glass the size of a golf ball.</p> <p>During a tour of the kitchenette on the memory care unit, accompanied by Dietary Aide 8, on 5/9/24 at 10:16 a.m., the following was observed:</p> <p>a. Dietary Aide 8 opened the refrigerator door, and at the bottom of the door the seal to the door was in two pieces and both hung from the bottom of the door. Below the condiment shelf on the door a red substance was splashed and had dripped down the door. On the back wall of the inside of the refrigerator, a red substance was splashed and had dripped down the wall. On shelf just above the drawers at the bottom of the refrigerator was a red substance and at the bottom of refrigerator and on the floor near the left corner of the</p>				<p>How the corrective actions will be monitored to ensure the deficient practice will not recur (what QAPI program)</p> <p>The facility will conduct Quality Assurance Audit using the QA Tool "Quality Assessment / Improvement Program Kitchen Sanitation – Food Procurement – Store, Prepare, Serve" and "Dietary Food Safety Sanitation Checklist" (Attachment B). This will be done 5X per week for 8 weeks, 3X per week for 8 weeks, weekly X 10 weeks, and monthly X2. This will be reviewed in the facility Quality Assurance and Performance Improvement meeting monthly. The facility will do so to ensure ongoing compliance for a minimum of 6 months and until the facility maintains 100% compliance for 60 days thereafter as part of the QA program using the QA Tool "Quality Assessment / Improvement Program Kitchen Sanitation – Food Procurement – Store, Prepare, Serve" and "Dietary Food Safety Sanitation Checklist"</p>		

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	<p>refrigerator was red liquid above the bottom drawers, on the shelf and red substance had ran down from the bottom of the door shelf.</p> <p>During an interview with the Dietary Manager, on 5/9/24 at 12:13 p.m., she indicated she was previously the Activity Director and was now the Dietary Manager, but was still doing a little bit of both jobs. She also had concerns about the cleanliness of the kitchen. Generally, when the food came off the truck it was automatically labeled and dated. Staffing had been a little rocky and they had hired a couple of people. They were working on retraining staff. There was a cleaning schedule for the dish room and as far as the kitchen went, the staff were to clean as they went. Sweeping and mopping were completed twice daily after lunch and after supper. The stove should be cleaned daily.</p> <p>During a follow-up visit to the kitchen, on 5/9/24 at 3:33 p.m., Cook 9 was visible from the serving window and did not have a hair net on. Cook 9 was standing between the prep table and the steam table. There was a pan of green beans on the stove. Cook 3 indicated Cook 9 had been at a meeting all day and was just dropping something off and normally wore a hair net in the kitchen. Cook 3 had her hair in a "messy bun" and no hair net was observed on her head. Cook 3 indicated her hair net was probably tangled up in her bun. She was the cook for the night, and there were only two dietary aides. It was difficult with two aides. They did not give second shift a dishwasher aide, and between the two of them, they had to cook, serve, clean, and do dishes after supper. Cook 3 tried to mop, take out trash, wipe the counters and make sure items were labeled and dated.</p>						

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	<p>During an interview with the former DON, Dietary Manager, and Administrator, on 5/9/24 at 4:30 p.m., the former DON indicated there was one resident who did not eat from the kitchen out of the 67 residents who were in the facility.</p> <p>During an interview with Cook 9, on 5/9/24 at 4:15 p.m., she indicated the kitchen was a mess. The facility tried to educate staff and they didn't listen. There had been a big turnover in the kitchen, and they had hired new staff.</p> <p>A current facility policy, titled "Food Protection and Storage," provided by the Administrator on 5/9/24 at 10:48 a.m., indicated the following: "...It is the policy of Miller's Health Systems, Inc. that all food shall be stored and protected under safe and sanitary conditions...Procedure...A. The Dietary Manager will check the food storage for: I. Clean floors and walls...IV. Clean and rust-free shelves with items organized...VII. Open boxes, containers of food are securely enclosed, labeled and dated...X. Food not in original containers are clearly labeled for contents, dated, and stored in food rated containers with tight fitting lids...."</p> <p>A current facility policy, titled "Dietary Sanitation," provided by the Administrator, on 5/9/24 at 10:48 a.m., indicated the following: "...Procedure: The Dietary Manager will modify cleaning procedures to meet cleaning methods and routines...."</p> <p>This citation relates to Complaint IN00433993.</p> <p>3.1-21(i)(3)</p>						