STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	155370	A. BUILDING 00 B. WING	02/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP COD
PREMIER HEALTHCARE OF NEW HARMONY	251 HIGHWAY 66 NEW HARMONY, IN 47631

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIE (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
F 0000 Bldg. 00	This visit was for the Investigation of Complaint IN00427118. Complaint IN00427118: Federal/State deficiencies related to the allegations are cited at F 812. Survey dates: February 6 & 7, 2024. Facility number: 000555 Provider number: 155370 AIM number: 100267530 Census Bed Type SNF/NF: 57 Total: 57 Census Payor Type Medicare: 4 Medicaid: 42 Other: 11 Total: 57 This deficiency reflects State Findings cited in accordance with 410 IAC 16.2-3.1. Quality review completed on February 8, 2024.	F 0000	Submission of this plan of correction by the facility is not a legal admission that a deficiency exists or that the statement of deficiencies was correctly cited. In addition, preparation and submission of this plan of correction does not constitute an admission or agreement of any kind by the facility of the truth of any facts set forth in this allegation by the survey agency. Please accept the following as the facility's credible allegation of compliance. the facility respectfully requests a desk review to determine substantial compliance.	
F 0812 SS=D Bldg. 00	483.60(i)(1)(2) Food Procurement,Store/Prepare/Serve-Sanitary §483.60(i) Food safety requirements. The facility must - §483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities.			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Janie Swedenburg	Administrator	02/20/2024

Any defiencystatement ending with an asterisk (*) denotes a deficency which the institution may be excused from correcting providing it is determin other safegaurds 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 disclo 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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	(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. §483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety. Based on observation and interview, the facility failed to ensure food was stored and labeled appropriately, and the areas free of food and debris in 2 of 2 kitchen observations. Food containers were found not labeled in the dry storage area, walk-in freezer, walk-in refrigerator, and shelving for spices in food preparation area in the kitchen. Food debris and paper were located in the walk-in freezer, drink refrigerator, refrigerator and dry storage. Findings include: On 2/6/24, during the initial tour of the kitchen at 8:32 A.M. the following were viewed in the walk-in refrigerator: Dry onion skins on the floor Orange Juice jug was not dated Lemonade container not dated 1 gallon of 2% milk gallon jug no open date Cucumbers in a box with no open date At 8:46 A.M. the drink refrigerator included:	F 0812	All food packaging was dated and sealed. All debris was cleaned up off the floor. The grease that was visible on the hood range was cleaned off. All residents have the potential to be affected by the alleged deficient practice. An audit of all food storage was completed. Any necessary labeling and storage of food items was completed. An in-service has been completed by the Administrator on Food Storage and Labeling for all kitchen staff. The staff now have a check off that must be done prior to clocking out to ensure no food items go unlabeled or stored properly. The Administrator will monitor all food storage and labeling 5x week	02/20/2024

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	1-gallon sized container of with an open date of 1/23/24 1 jar of chopped garlic in water with no open date 2 pre-made bottles of dressing with no preparation or open date 1 bottle of raspberry vinaigrette dressing no open or expiration date 1 bottle of lemon juice that was separated with no open or expiration date 1 box of opened backing soda with no open date Vent under hood had grease build up. At 8:50 A.M. the spice rack included: 1 container of ground nutmeg opened 11/1/22 no expiration date 1 container of ginger opened 10/31/22 no expiration date 1 container of gloves with no open date 1 container of onion powder with no open date 2 bottles of Worcestershire Sauce with no open date- the bottle contents were separated- best by date of 8/25/25 1 large container of cinnamon with no open date 1 container of garlic powder with open date with use best date 11/25/25 At 9:00 A.M., the dry storage included: 1 large bag of bread crumb with no opening date not or stored securely. 2 bottles of vegetable oil with no open date 1 bottle of red wine vinegar with no open date 1 large box egg noodles not properly stored, was open to air with no open 3 packets of crackers on the floor under racks On 2/7/24 at 8:10 A.M. second observation of kitchen included: Hood under vent grease marks were present		for 4 weeks, 3x week for 4 weeks and 1x week for 4 weeks to ensure compliance with F812. The results of this monitoring will be forwarded to QAPI for further review and any needed changes.	

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	At 8:12 A.M., the drink refrigerator included: 1 jar of garlic in water not labeled 1 gallon container of cottage cheese with open date 1/23/24 Food debris on floor by prep table At 8:15 A.M., the dry storage room included: 3 packages of crackers still on floor 1 bag of breadcrumbs not dated and not securely cover At 8:20 A.M., the freezer included: several pieces of paper debris scattered on the floor During an interview on 2/6/24 at 8:46 A.M., Cook 10 indicated food needs to be dated on the day that is opened or prepared. During an interview on 2/7/24 at 8:15 A.M., Cook 7 indicated the crumbs should be in a closed bin and the date open marked on it. On 2/7/24 at 9:20 A.M., the Administrator indicated she was currently covering the supervision of the dietary department due to not having a Food Service Supervisor. She provided a current policy at that time "Storage of Dry Goods/Foods" dated 2010. The policy indicated "...food stored in bins ... will be removed from original packaging and bins will be labeled with item and date unpackaged...open products will be label and tightly secured to protect against contamination." On 2/7/24 at 9:20 A.M., the Administrator provided a current policy "Storage of Refrigerated Foods" dated 2010. The policy indicated "...food in the refrigerator will be covered, labeled, and			

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	dated." This citation related to Complaint IN00427118. 3.1-21(i)(2) 3.1-21(i)(3)			