

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 344020	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 3/23/2023
NAME OF PROVIDER OR SUPPLIER SKLD IONIA			STREET ADDRESS, CITY, STATE, ZIP CODE 814 E LINCOLN AVE IONIA, MI 48846		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (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
F0000 SS=	INITIAL COMMENTS SKLD Ionia was surveyed for an onsite unannounced annual recertification survey on 03/21/23 to 03/23/23 . Census= 76 The Statement of Deficiencies was reviewed through the Informal Dispute Resolution (IDR) process and the findings are as follows: Level F: 812 Supported.	F0000			
F0812 SS= F	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. (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. This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to properly label and store chemicals, properly store personal items, and maintain clean food contact surfaces, resulting in the potential	F0812	F812 No residents were identified in the CMS Form – 2567. All residents have the potential to be affected. The facility removed water pitcher from sink, removed and discarded unlabeled spray bottles, removed dietary staff personal items from kitchen and cleaned can opener. The Administrator/designee will educate dietary personnel by 04/13/2023 on policies and procedures related to food storage, temperature controls of kitchen equipment, and kitchen cleaning and sanitizing to ensure proper storage, preparation, distribution, and serving of food in accordance with professional standards for food service safety. The Administrator/designee will conduct 5 random audits of the kitchen weekly x 4 weeks, then monthly x 3 months, to ensure proper storage of personal items, preparation, distribution, and serving of food in accordance with professional standards for food service		4/13/2023

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

TITLE

(X6) DATE

Electronically Signed

04/10/2023

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.

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	<p>contamination on equipment and food, affecting all residents in the facility.</p> <p>Findings include:</p> <p>On 3/21/23 at 5:54 AM, a water pitcher was observed to be sitting in the sink basin of the handwashing sink, located next to the walk-in cooler.</p> <p>According to the 2017 FDA Food Code Section 5-205.11 Using a Handwashing Sink.</p> <p>"(A) A HANDWASHING SINK shall be maintained so that it is accessible at all times for EMPLOYEE use. Pf</p> <p>(B) A HANDWASHING SINK may not be used for purposes other than handwashing. Pf</p> <p>(C) An automatic handwashing facility shall be used in accordance with manufacturer's instructions. Pf "</p> <p>On 3/21/23 at 6:04 AM, two working spray bottles were observed in the dish washing area with no label to identify the contents. One spray bottle was observed on the drying rack, stored above clean equipment. At 7:10 AM, Dietary Manager "C" was observed to move the spray bottles to the dish machine drain board.</p> <p>According to the 2017 FDA Food Code Section 7-102.11 Common Name. "Working containers used for storing POISONOUS OR TOXIC MATERIALS such as cleaners and SANITIZERS taken from bulk supplies shall be clearly and individually identified with the common name of the material."</p>		<p>safety. The results will be presented to the QAA committee for review and consideration of further corrective actions.</p> <p>The Administrator will be responsible for assuring substantial compliance is attained through this plan of correction by 04/13/2023 and for sustained compliance thereafter.</p>		

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	<p>On 3/21/23 at 6:05 AM, three employee jackets were observed to be stored on three different rolling carts, all located in food prep areas. One cart was located on the cook line, directly next to the stove top/oven. At 7:10 AM, Dietary Manager "C" stated that the staff have a separate area to store their personal belongings.</p> <p>According to the 2017 FDA Food Code Section 7-209.11 Storage.</p> <p>"Except as specified under §§ 7-207.12 and 7-208.11, EMPLOYEES shall store their PERSONAL CARE ITEMS in facilities as specified under 6-305.11(B)."</p> <p>On 3/21/23 at 6:06 AM, the can opener blade was observed to be soiled with food debris accumulation.</p> <p>According to the 2017 FDA Food Code Section 4-601.11 Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils.</p> <p>"(A) EQUIPMENT FOOD-CONTACT SURFACES and UTENSILS shall be clean to sight and touch. Pf</p> <p>(B) The FOOD-CONTACT SURFACES of cooking EQUIPMENT and pans shall be kept free of encrusted grease deposits and other soil accumulations.</p> <p>(C) NonFOOD-CONTACT SURFACES of EQUIPMENT shall be kept free of an accumulation of dust, dirt, FOOD residue, and other debris. "</p>						

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F0921 SS= E	<p>Safe/Functional/Sanitary/Comfortable Enviro §483.90(i) Other Environmental Conditions The facility must provide a safe, functional, sanitary, and comfortable environment for residents, staff and the public. This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to store equipment and supplies safely, maintain ventilation systems, and provide backflow protection devices to control plumbing cross connections, resulting in the potential contamination of equipment and the domestic water supply, and potential for odors, affecting all residents in the facility.</p> <p>Findings include:</p> <p>On 3/21/23 at 6:27 AM, a box of toilet paper was observed to be stored on the floor in the housekeeping closet next to resident room 40.</p> <p>On 3/21/23 at 6:30 AM, a box of toilet paper was observed to be stored on the floor in the storage room next to resident room 49.</p> <p>On 3/21/23 at 6:31 AM, the fish tank in the B South Dining Room was observed to have significant algae accumulation. At 10:15 AM, the Administrator stated that a few specific facility staff are responsible for maintaining the fish tank.</p> <p>On 3/21/23 at 6:35 AM, the exhaust vent in the B South Spa was observed to not be working, tested with a paper towel to determine if exhaust force is adequate. The</p>	F0921	<p>F921 No residents were identified in the CMS Form – 2567.</p> <p>All residents have the potential to be affected.</p> <p>All boxes were removed from the floor, the fish tank in the back dining room was immediately cleaned and will be removed from the facility. The exhaust vent in the B south spa had a burnt-out motor that was replaced and tested. A hose bibb AVB has been installed on the faucet that was identified in the laundry room.</p> <p>The Administrator/designee will educate the facility personnel by 04/19/2023 on policies and procedures related to facility cleanliness and the process for reporting needed repairs or maintenance utilizing the work order software (TELS) to ensure a safe, functional, sanitary, and comfortable environment for residents, staff, and the public.</p> <p>The Housekeeping supervisor/designee will conduct environmental observation audits weekly x 4 weeks, then monthly x 3 months, or until substantial compliance has been maintained, to ensure a safe, functional, sanitary, and comfortable environment for residents, staff, and the public. The results will be presented to the QAA committee for review and consideration of further corrective actions.</p> <p>The Administrator will be responsible for assuring substantial compliance is attained through this plan of correction by 04/19/2023 and for sustained compliance thereafter.</p>		4/19/2023

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	<p>exhaust vent was not able to pull the paper towel. Additionally, the light shield for the florescent lights in the Spa was observed to be missing. At 10:20 AM, Maintenance Director "D" said that he knew the motor burnt out last week and hasn't had a chance to replace it.</p> <p>On 3/21/23 at 6:37 AM, two boxes of air life prefilled humidifier systems were observed to be stored on the floor in the nursing supply storage room on B South.</p> <p>On 3/21/23 at 10:25 AM, the B South Storage room was observed to have a box of cups stored on the floor.</p> <p>On 3/21/23 at 10:40 AM, a hose fixture, located behind the laundry washers, was observed to not be provided with a backflow prevention device to prevent any backflow of solid, liquid, or gas contaminants into the domestic water supply. At this time, Maintenance Director "D" stated that he will remove the hose from the fixture.</p> <p>During an interview on 3/22/23 at 10:19 AM, the Administrator said that the motor for the Roof Top Unit providing exhaust ventilation for the B South hall was ordered on 3/21/23, as noted on a shipping confirmation document provided by the facility.</p>						