

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

PRINTED: 09/13/2024  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>435035</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b>  <b>09/04/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>ROLLING HILLS HEALTHCARE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2200 13TH AVE</b> <b>BELLE FOURCHE, SD 57717</b>		
(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	
F 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint health survey for compliance with 42 CFR Part 483, Subpart B, requirements for Long Term Care facilities was conducted 9/3/24 through 9/4/24. Areas surveyed included: resident abuse, resident neglect related to activities of daily living, prompt and appropriate provision of resident care related to acute and chronic medical conditions, and dietary infection control practices. Rolling Hills Healthcare was found not in compliance with the following requirements: F801, F812, and F880.</p> <p>On 9/3/24 at 3:45 p.m., notice of immediate jeopardy (IJ) was given verbally and in writing to administrator A related to the provider's failure to ensure: *The wash water temperature in the three-compartment sink in the kitchen was maintained at a temperature of 110 degrees Fahrenheit (F) per the Food and Drug Administration's (FDA) recommendation and the provider's policy. *The sanitizer temperature in the three-compartment sink in the kitchen was maintained at a temperature of 75 degrees F per the FDA's recommendation and the provider's policy.</p> <p>Notice: On 9/3/24 at 3:45 p.m., notice of immediate jeopardy (IJ) was given verbally and in writing to administrator A related to the provider's failure to ensure: *The wash water temperature in the three-compartment sink was maintained at a temperature of 110 degrees Fahrenheit (F) per the Food and Drug Administration's (FDA)</p>	F 000			

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

TITLE

(X6) DATE

*T Harwood*

Licensed Nursing Home Administrator

9/23/2024

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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F 000	Continued From page 1 recommendation and the provider's policy. *The sanitizer temperature in the three-compartment sink was maintained at a temperature of 75 degrees F per the FDA's recommendation and the provider's policy. She was asked for an immediate removal plan for the F812 deficient practice.  On 9/4/24: *At 12:50 p.m. an IJ removal plan was received from administrator A. *At 1:12 p.m. the IJ removal plan was accepted. *At 1:30 p.m. while on-site the survey team verified the immediacy was removed.	F 000		
F 801 SS=D	The resident census was 51. Qualified Dietary Staff CFR(s): 483.60(a)(1)(2)  §483.60(a) Staffing The facility must employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, taking into consideration resident assessments, individual plans of care and the number, acuity and diagnoses of the facility's resident population in accordance with the facility assessment required at §483.71.  This includes: §483.60(a)(1) A qualified dietitian or other clinically qualified nutrition professional either full-time, part-time, or on a consultant basis. A qualified dietitian or other clinically qualified nutrition professional is one who- (i) Holds a bachelor's or higher degree granted by a regionally accredited college or university in the United States (or an equivalent foreign degree)	F 801	Corrective Action Administrator and Dietary Manager reviewed the state and federal regulations for dietary manager on 9/5/2024. Facility Dietary Manager was transitioned to full time position of at least 35 hours a week effective 9/5/2024 per the federal and state requirements. Dietary manager and cook enrolled in ServSafe Manager Course on 9/12/2024 for food protection manager certification with examination completed on 9/23/2024 to meet the federal and state requirements. Dietary Manager will continue to work through the Certified Dietary Manager course and will complete within 18 months of enrollment. Dietary manager, primary dayshift cook, primary evening cook completed Serve Safe Food Handler course. Evening cook completed on 9/3/2024, dayshift cook and DM completed on 9/4/2024.	9/23/2024

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F 801	Continued From page 2 with completion of the academic requirements of a program in nutrition or dietetics accredited by an appropriate national accreditation organization recognized for this purpose. (ii) Has completed at least 900 hours of supervised dietetics practice under the supervision of a registered dietitian or nutrition professional. (iii) Is licensed or certified as a dietitian or nutrition professional by the State in which the services are performed. In a State that does not provide for licensure or certification, the individual will be deemed to have met this requirement if he or she is recognized as a "registered dietitian" by the Commission on Dietetic Registration or its successor organization, or meets the requirements of paragraphs (a)(1)(i) and (ii) of this section. (iv) For dietitians hired or contracted with prior to November 28, 2016, meets these requirements no later than 5 years after November 28, 2016 or as required by state law.  §483.60(a)(2) If a qualified dietitian or other clinically qualified nutrition professional is not employed full-time, the facility must designate a person to serve as the director of food and nutrition services. (i) The director of food and nutrition services must at a minimum meet one of the following qualifications- (A) A certified dietary manager; or (B) A certified food service manager; or (C) Has similar national certification for food service management and safety from a national certifying body; or (D) Has an associate's or higher degree in food service management or in hospitality, if the	F 801	Identification of Others One Dietary cook was enrolled in ServSafe Manager Course on 9/12/2024 for food protection manager certification and will complete by 9/23/2024 or before working next shift after 9/23/2024, to meet the federal and state requirements.  Systemic Changes Facility will provide current dietary staff and new hire dietary staff ServSafe Food Handler course to be completed within 30 days of enrollment or date of hire. LNHA gave education to Dietary Manager on supervisory roles including ensuring the department adheres to State and Federal regulations regarding ServSafe certification.  Monitoring: LNHA will monitor the DM's progress on Certified Dietary Manager Course, and ServSafe education for dietary staff. Monitoring will be done weekly until a lesser frequency is determined by IDT/ QAPI.		

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F 801	Continued From page 3 course study includes food service or restaurant management, from an accredited institution of higher learning; or (E) Has 2 or more years of experience in the position of director of food and nutrition services in a nursing facility setting and has completed a course of study in food safety and management, by no later than October 1, 2023, that includes topics integral to managing dietary operations including, but not limited to, foodborne illness, sanitation procedures, and food purchasing/receiving; and (ii) In States that have established standards for food service managers or dietary managers, meets State requirements for food service managers or dietary managers, and (iii) Receives frequently scheduled consultations from a qualified dietitian or other clinically qualified nutrition professional. This REQUIREMENT is not met as evidenced by: Based on interview and job description review, the provider failed to ensure the dietary supervisor had completed the necessary requirements to manage their food and nutrition services. Findings include:  1. Interview on 9/4/24 at 1:05 p.m. with dietary supervisor B revealed she: *Assumed the dietary supervisor position on a part-time basis in February 2024. -Also worked part-time at the facility as the human resources director. *Was enrolled in but had not yet completed the required dietary manager training program. -Stated a registered dietician consulted at the facility but not on a full-time basis. *Had not completed the required ServSafe training program.	F 801			

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F 801	Continued From page 4 *Was not aware of the state and federal regulations related to her dietary supervisor position.  Review of the provider's undated Dietary Supervisor job description revealed: *Certificates, licenses, and registrations: -"Must be a certified dietary manager or willing to become certified within four months of employment." -Must maintain current ServSafe certification."	F 801		
F 812 SS=L	Food Procurement, Store/Prepare/Serve-Sanitary CFR(s): 483.60(i)(1)(2)  §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, record review, job description review, and policy review, the provider failed to:	F 812	Corrective Action: All cookware that has been washed and sanitized in the compartment sink were sent through dishwasher on 9/3/2024 to ensure appropriate wash and sanitize of all cookware and to remove the potential risk of foodborne illnesses. The water temperature was tested on 9/3/2024 and verified to come out above required temps at 115-118 degrees. Testing was completed and verified that sanitizer pumps at 200ppm when used with the pump hose Hydro System sink master model 8831.  Identification of Others: On 9/5/2024 the Director of Nursing and assistant Director of Nursing completed staff interviews and resident interviews ensuring facility does not have widespread illness related to incorrect preparation of sanitizer and water temperatures for washing.	9/13/2024

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F 812	<p>Continued From page 5</p> <p>*Maintain the temperature of the water in the three-compartment wash sink in the kitchen at a minimum of 110 degrees Fahrenheit (F).</p> <p>*Maintain the temperature of the water in the three-compartment sanitizer sink in the kitchen at a minimum of 75 degrees F.</p> <p>Those failures increased the potential risk of foodborne illnesses for the entire resident population who received meals that were prepared in the kitchen. Findings include:</p> <p>1. Observation on 9/3/24 at 12:15 p.m. in the kitchen near the three-compartment sink revealed:</p> <p>*On the wall above the sink posted signage read: "Dishwashing By Hand: The Basics."</p> <p>-Wash: 110 degrees F with detergent.</p> <p>-Sanitize: 75 degrees F with sanitizer.</p> <p>*A September 2024 "Three-Compartment Sink Log" that kitchen staff documented the temperature of the wash water used in the wash sink.</p> <p>-"Wash Temp [temperature]: 110 degrees F" was type-written at the bottom left corner of the log.</p> <p>-Five of five documented wash water temperatures were 90 degrees F or lower.</p> <p>Interview on 9/3/24 at 12:20 p.m. with cook C at the three-compartment sink revealed she:</p> <p>*Was hand washing cookware she used to prepare the noon meal.</p> <p>*Thought the water temperature in the wash sink should have been 104 degrees F and the water temperature in the sanitizer sink should have been 70 degrees F.</p> <p>*Documented the wash water temperatures for the morning meal services on 9/1/24, 9/2/24, and 9/3/24 as 90 degrees F or less.</p> <p>-Agreed based on the signage by the</p>	F 812	<p>Systemic Changes:</p> <p>A new log was created by DM on 9/3/2024 to record wash, rinse, sanitizer water temperatures, and sanitizer ppm with each use, including what to do if temps or ppm are outside of parameters. The formatting of this log was updated on 9/12/2024. LNHA provided education to DM on 9/3/2024, on the policy and procedure manual, including 3 compartment sink method regulations, job description of dietary manager including adherence to policies and ensuring that sanitary regulations are followed by the entire department. Education provided on supervisory roles including ensuring the department adheres to State and Federal regulations, and assuming the authority, responsibility and accountability to carry out the duties of the dietary department, monitor use of equipment and chemicals, and ensuring required documentation is completed and appropriate per regulations. Education included reporting to LNHA any areas of concern within the dietary department, equipment, and chemicals. DM educated all dietary staff on the 3 sink method, 3 compartment sink order, 3 compartment sink steps, water temperature in a 3 compartment sink, sanitizer temp, and when it is essential to clean and sanitize a utensil, sanitize per manufacturer recommendations that includes submerging for at least 1 minute. Education to dietary staff on compartment sink log requirements of testing temps and sanitizer ppm, including action required if temps are not within the requirements.</p>		

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F 812	<p>Continued From page 6</p> <p>three-compartment sink, the wash water temperature should have been 110 degrees F and the sink sanitizer water temperature should have been 75 degrees F.</p> <p>Interview on 9/3/24 at 1:05 p.m. with dietary supervisor B revealed she: *Had not known the expectation for the wash water temperature in the three-compartment sink. -Stated it "should be warmer than 90 degrees F." *Reviewed the Three-Compartment Sink Logs monthly only to ensure documentation was completed and not to ensure data was within the expected parameters.</p> <p>Continued interview with dietary supervisor B and cook C and review of the August 2024 Three-Compartment Sink Log revealed: *Under the wash temperature column, the wash water temperatures were either exceedingly high (up to 210 degrees F) or exceedingly low (70 degrees F). *Dietary supervisor B and cook C concluded: -Either the sanitizer water temperature or the PPM (parts per million-a measurement of the concentration of sanitizer) number was documented in the wash water temperature column for the entire month. --No wash water temperatures were documented in August 2024. *Under the PPM column of the log, 23 of 77 recorded PPMs were less than the expected 150-200 PPM range. *Dietary supervisor B and Cook C concluded: -The sanitizer water temperature was documented in the PPM column for most of the month. *53 of 77 recorded sanitizer water temperatures documented in the PPM column were not</p>	F 812	<p>Education was completed on 9/3/2024. Those not educated on 9/3/2024 were educated prior to working next shift.</p> <p>Monitoring: Dietary manager or designee will monitor dietary staff use of the 3 compartment sink to ensure water used to fill sink is only hot water, water in wash and rinse sink are temped with each use, water is emptied from wash and rinse sink after 35 mins or when water reaches below 110 degrees. DM will monitor temp log to ensure staff are testing and recording wash and rinse water temps, sanitizer temps are at, or above requirements and sanitizer is at 200ppm. DM will monitor to ensure staff are competent on the requirements of sanitizer use in the compartment sink, including not adding water to already to pre-metered chemicals and submerging in sanitizer for at least 1 min. All monitoring was completed daily for one week upon exit of survey and continue with 3 times weekly until a lessor frequency is determined by IDT/QAPI. LNHA will monitor weekly that DM is competent on required temps and sanitizer PPM, DM is ensuring dietary department is in compliance with the 3 compartment sink method, competency of water temps, acceptable PPM for sanitizer and soaking time of sanitizer, and monitoring of logs to ensure accurate and appropriate wash and rinse temps, and sanitizer ppm. Monitoring will be done weekly until a lessor frequency is determined by IDT/ QAPI.</p>		

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F 812	<p>Continued From page 7</p> <p>maintained at a temperature of 75 degrees F per the FDA's recommendation and the provider's policy.</p> <p>Notice: On 9/3/24 at 3:45 p.m., notice of immediate jeopardy (IJ) was given verbally and in writing to administrator A related to the provider's failure to ensure:</p> <p>*The wash water temperature in the three-compartment sink in the kitchen was maintained a temperature of 110 degrees Fahrenheit (F) per the Food and Drug Administration's (FDA) recommendation and the provider's policy.</p> <p>*The sanitizer temperature in the three-compartment sink in the kitchen was maintained at a temperature of 75 degrees F per the FDA's recommendation and the provider's policy. She was asked at that time for an IJ removal plan for the F812 deficient practice.</p> <p>On 9/4/24: *At 12:50 p.m. an IJ removal plan was received from administrator A. *At 1:12 p.m. the IJ removal plan was accepted. *At 1:30 p.m. while on-site the survey team verified the immediacy was removed. After the removal of the immediate jeopardy, the scope and severity of the citation level was "F"</p> <p>Plan: 1. "DM [dietary supervisor] educated all dietary staff on the 3 sink [three-compartment sink] method, 3 compartment sink order, 3 compartment sink steps, water temperature in a 3 compartment sink, sanitizer temp [temperature], and when it is essential to clean and sanitize a utensil, sanitizer per manufacturer</p>	F 812			



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F 812	Continued From page 8 recommendations that include submerging for at least 1 minute. 2. Education to dietary staff on compartment sink log requirements of testing temps and sanitizer ppm, including action required if temps are not within the requirements. Education completed on 9/3/24. Those not educated on 9/3/24 will be educated prior to working next shift. 3. DM, primary dayshift cook, primary evening cook, are enrolled in ServSafe Certification to be completed on 9/3/24 by evening cook, 9/4/24 prior to working shift for dayshift cook, by end of day 9/4/24 for DM. 4. All new dietary staff will receive ServSafe certification and complete by 9/30/24. 5. A new log was created by DM to record wash, rinse, sanitizer water temperatures, and sanitizer ppm with each use, including what to do if temps or ppm are outside of parameters. 6. LNHA [administrator] provided education to DM on 9/3/24 on the policy and procedure manual, including 3 compartment sink method regulations, job description of the dietary manager including adherence to policies and ensure that sanitary regulations are followed by the entire department. 7. Education provided on supervisory roles including ensuring the department adheres to State and Federal regulations, and assuming the authority, responsibility and accountability to carry out the duties of the dietary department, monitor use of equipment and chemicals, and ensuring required documentation is competed and appropriate per regulations. 8. Education included reporting to LNHA any areas of concern within the dietary department, equipment, and chemicals. 9. Dietary manager will complete ServSafe certification by end of day 9/4/24."	F 812			

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F 812	Continued From page 9  Review of the provider's undated Dietary Supervisor job description revealed the essential duties and responsibilities of the position included: "Must ensure that safety precautions, sanitary regulations, infection control and universal precautions are followed by the entire department during daily work assignments."  Review of the provider's 2019 Cleaning Dishes-Manual Dishwashing policy revealed: *Sink 1: Wash" -"3. Water should be at 110 degrees F." *Sink 3: Sanitize" -"1. Water should be 75 to 100 degrees F."	F 812			
F 880 SS=D	Infection Prevention & Control CFR(s): 483.80(a)(1)(2)(4)(e)(f)  §483.80 Infection Control The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections.  §483.80(a) Infection prevention and control program. The facility must establish an infection prevention and control program (IPCP) that must include, at a minimum, the following elements:  §483.80(a)(1) A system for preventing, identifying, reporting, investigating, and controlling infections and communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual	F 880	Corrective Action Dietary Manager, Director of Nursing, Assistant Director of Nursing provided education to cook C on 9/4/2024 on infection control practices with glove use, including changing gloves during transition of food preparation and food serving task, and risk of cross contamination with cracked or broken equipment. The cracked food processor lid with missing plastic was replaced on 9/13/2024.  Identification of Others: All dietary staff are at risk of inadequate infection control and prevention practices related to glove use.	9/13/2024	

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

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NAME OF PROVIDER OR SUPPLIER  <b>ROLLING HILLS HEALTHCARE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2200 13TH AVE</b> <b>BELLE FOURCHE, SD 57717</b>		
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F 880	Continued From page 10 arrangement based upon the facility assessment conducted according to §483.71 and following accepted national standards;  §483.80(a)(2) Written standards, policies, and procedures for the program, which must include, but are not limited to: (i) A system of surveillance designed to identify possible communicable diseases or infections before they can spread to other persons in the facility; (ii) When and to whom possible incidents of communicable disease or infections should be reported; (iii) Standard and transmission-based precautions to be followed to prevent spread of infections; (iv) When and how isolation should be used for a resident; including but not limited to: (A) The type and duration of the isolation, depending upon the infectious agent or organism involved, and (B) A requirement that the isolation should be the least restrictive possible for the resident under the circumstances. (v) The circumstances under which the facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease; and (vi) The hand hygiene procedures to be followed by staff involved in direct resident contact.  §483.80(a)(4) A system for recording incidents identified under the facility's IPCP and the corrective actions taken by the facility.  §483.80(e) Linens. Personnel must handle, store, process, and	F 880	<b>Systemic Changes:</b> Glove use education is posted throughout the dietary department for reference and reminders. All dietary staff were educated on 9/4/2024 on infection control with glove use. Education included return knowledge and competency of proper glove use with meal preparation, and generalized glove use in the dietary department.  <b>Monitoring:</b> Dietary Manager or designee will monitor dietary staff's infection control practices with glove use to ensure gloves are applied, removed and changed to meet infection control and prevention practices. Monitoring will be completed 3 times weekly. Monitoring will be done weekly until a lessor frequency is determined by IDT/QAPI.		

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F 880	<p>Continued From page 11</p> <p>transport linens so as to prevent the spread of infection.</p> <p>§483.80(f) Annual review. The facility will conduct an annual review of its IPCP and update their program, as necessary. This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, record review, and policy review, the provider failed to ensure infection control and prevention practices were maintained by one of one cook (C) during one of one observed meal service. Findings include:</p> <p>1. Observations on 9/4/24 between 11:25 a.m. and 12:25 p.m. of cook C while preparing the noon meal service revealed: *With gloved hands she: -Covered the full metal containers to be placed on the steam table with aluminum foil then reached inside of her pocket and removed a permanent marker. -Used the marker to write diet texture information on top of the foil then returned the marker to her pocket. *With those same gloved hands she: -Inserted them inside a pair of brown-stained oven mitts and removed food from the heated food holding device. -After removing her hands from the oven mitts she continued touching pans, cabinet doors, drawer handles, meal service eating utensils and cups. *She removed those gloves and commented, "My hands are getting sweaty" then performed hand hygiene before applying a clean pair of gloves.</p> <p>2. Observation of cook C while she prepared to puree the pasta for the meal service revealed</p>	F 880			

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F 880	<p>Continued From page 12</p> <p>cook C: *Placed the food bowl containing pasta on the base of the food processor. *Attached the clear plastic bowl cover on top of the food bowl. -The top of the cover was cracked in the middle from side to side and there was also a small, square-shaped piece of plastic missing. *After use, cook C hand washed the damaged cover in the three-compartment sink and left it on the drying rack.</p> <p>3. Observation of cook C while she prepared then plated the noon meal food items at the steam table in the main dining room revealed: *With gloved hands cook C: -Touched and moved the handle of the food service cart to place resident room trays on it. -Reached into a plastic tub and retrieved clean cups. -Opened and closed the microwave door and heated individual soup cups. -Filled then rolled a flour tortilla, all with those same gloved hands. *No glove changes were made between the transition from touching unclean surfaces to clean surfaces and foods prepared for resident consumption.</p> <p>Interview on 9/4/24 at 1:05 p.m. with dietary supervisor B regarding the above observations of cook C revealed: *Gloves were not used properly and glove changes were not made as expected between transitions in food preparation and food serving tasks. -Improper glove use increased the risk of cross-contamination occurring.</p>	F 880			

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F 880	Continued From page 13 Review of the provider's 2019 Bare Hand Contact with Food and Use of Plastic Gloves policy revealed: **3. Gloved hands are considered a food contact surface that can get contaminated or soiled. If used, single use gloves shall be used for one task (such as working with ready-to-eat food or raw animal food), used for no other purpose, and discarded when damaged or soiled, or when interruptions occur in the operation." **6. Gloves are just like hands. They get soiled. Anytime a contaminated surface is touched, the gloves must be changed, and hands must be washed." -"g. During food preparation, as often as necessary to remove soil and contamination and to prevent cross contamination when changing tasks."	F 880			

South Dakota Department of Health

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S 000	Compliance/Noncompliance Statement  A complaint health survey for compliance with 42 CFR Part 483, Subpart B, requirements for Long Term Care facilities was conducted from 9/3/24 through 9/4/24. Areas surveyed included maintaining acceptable food temperatures prior to serving food and ensuring infection control practices were followed in the kitchen. Rolling Hills Healthcare was found not in compliance with the following requirement: S296.	S 000		
S 296	44:73:07:11 Director of Dietetic Services  A full time dietary manager who is responsible to the administrator shall direct the dietetic services. Any dietary manager that has not completed a Dietary Manager's course, approved by the Association of Nutrition & Foodservice Professionals, shall enroll in a course within 90 days of the hire date and complete the course within 18 months. The dietary manager and at least one cook must shall successfully complete and possess a current certificate from a ServSafe Food Protection Program offered by various retailers or the Certified Food Protection Professional's Sanitation Course offered by the Association of Nutrition & Foodservice Professionals, or successfully completed equivalent training as determined by the department. Individuals seeking ServSafe recertification are only required to take the national examination. The dietary manager shall monitor the dietetic service to ensure that the nutritional and therapeutic dietary needs for each resident are met. If the dietary manager is not a dietitian, the facility shall schedule dietitian consultations onsite at least monthly. The dietitian shall approve all menus, assess the nutritional status of residents with problems identified in the assessment, and review and revise dietetic	S 296	Corrective Action Administrator and Dietary Manager reviewed the state and federal regulations for dietary manager on 9/5/2024. Dietary manager and one cook enrolled in ServSafe Manager Course on 9/12/2024 for food protection manager certification, as recommended by surveyor, to be completed and examination scheduled 9/23/2024 to meet the federal and state requirements. Dietary Manager will continue to work through the Certified Dietary Manager course and will complete within 18 months of enrollment. Dietary manager, primary dayshift cook, primary evening cook completed Serve Safe Food Handler course. Evening cook completed on 9/3/2024, dayshift cook, and DM completed on 9/4/2024.  Identification of Others One Dietary cook was enrolled in ServSafe Manager Course on 9/12/2024 for food protection manager certification and will complete by 9/23/2024 or before working next shift after 9/23/2024, to meet the federal and state requirements.	9/23/2024

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

*T Harwood*

Licensed Nursing Home Administrator

TITLE

9/23/2024

(X6) DATE

South Dakota Department of Health

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S 296	<p>Continued From page 1</p> <p>policies and procedures during scheduled visits. Adequate staff whose working hours are scheduled to meet the dietetic needs of the residents shall be on duty daily over a period of 12 or more hours in facilities.</p> <p>This Administrative Rule of South Dakota is not met as evidenced by: Based on interview and job description review, the provider failed to ensure the dietary supervisor and one cook possessed a current ServSafe Food Protection Program certificate. Findings include:</p> <p>1. Interviews on 9/3/24 at 10:30 a.m. and on 9/4/24 at 12:30 p.m. with dietary supervisor B revealed she: *Had not completed the ServSafe Food Protection Program. *Confirmed there were no cooks who had completed the ServSafe Food Protection Program. *Was not aware of the state or federal regulations for the dietary supervisor or cook positions.</p> <p>Review of the provider's undated Dietary Supervisor's job description revealed the dietary supervisor, "Must maintain current ServSafe certification".</p>	S 296	<p><b>Systemic Changes</b> Facility will provide current dietary staff and new hire dietary staff ServSafe Food Handler course to be completed within 30 days of enrollment or date of hire. LNHA gave education to Dietary Manager on supervisory roles including ensuring the department adheres to State and Federal regulations regarding ServSafe certification. <b>Monitoring:</b> LNHA will monitor the DM's progress on Certified Dietary Manager Course, and ServSafe education for dietary staff. Monitoring will be done weekly until a lessor frequency is determined by IDT/ QAPI.</p>	