South Dakota Department of Health STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY (X1) PROVIDER/SUPPLIER/CLIA AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED. A. BUILDING: _ B. WING 50258 07/18/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 126 W 12TH AVE POST OFFICE BOX 150 EASTERN STAR HOME OF SD ASSISTED LIVING REDFIELD, SD 57469 PROVIDER'S PLAN OF CORRECTION SUMMARY STATEMENT OF DEFICIENCIES (X5)(X4) ID COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE **PREFIX** DATE REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) S 000 Compliance Statement S 000 A licensure survey for compliance with the Administrative Rules of South Dakota, Article 44:70, Assisted Living Centers, requirements for assisted living centers, was conducted from 7/16/25 to 7/18/24. Eastern Star Home of SD Assisted Living was found not in compliance with the following requirements: S106 and S201. S 106 44:70:02:06 Food Service S 106 S 106 Food Service A facility of seventeen beds or more shall have a Since it is the responsibility of the mechanical dishwasher. The facility shall have facility to ensure the space, the space, equipment, supplies and mechanical equipment, supplies and systems for efficient, safe, and sanitary food mechanical systems for efficient, preparation if any part of the food service is safe, and sanitary food preparation, provided by the facility. the following actions were instituted to ensure the dishwasher wash cycle temperature is maintained at This Administrative Rule of South Dakota is not a minimum of 120 degrees met as evidenced by: Fahrenheit per the manufacturer's Based on observation, interview, record review, manual. and policy review, the provider failed to maintain the dishwasher wash cycle temperature at a On July 18, 2024, the Administrator minimum of 120 degrees Fahrenheit per the met with all Dietary staff to review manufacturer's manual for one of one the Dishwasher Temperature dishwasher. Failure to ensure that increased the Policy as well as the potential risk of foodborne illnesses for the entire Low-Temperature Dishwasher resident population who received meals prepared Chart. in the kitchen. Findings include: On July 19, 2024, ECO Lab and Jessen Heating and Cooling 1. Observation and interview on 7/17/24 at 10:58 installed a booster water heater to a.m. with cook E in the kitchen revealed: the dishwasher. *The wash cycle temperatures on The "Dishwashing Machine Temperature" log was recorded as follows: -7/13/24 Breakfast 100 degrees Fahrenheit, dinner 112 degrees Fahrenheit, supper 108 degrees Fahrenheit.

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

TITLE

7G1011

(X6) DATE

Deborah Bowar

STATE FORM

EAdministrator

08/08/2024

If continuation sheet 1 of 5

AUG 09 2024

South Dakota Department of Health (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION COMPLETED. IDENTIFICATION NUMBER: A. BUILDING: B. WNG 50258 07/18/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 126 W 12TH AVE POST OFFICE BOX 150 EASTERN STAR HOME OF SD ASSISTED LIVING REDFIELD, SD 57469 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE COMPLETE PREFIX PREFIX DATE REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) S 106 | Continued From page 1 S 106 S 106 Food Service Continued. -7/14/24 Breakfast was left blank, dinner 106 degrees Fahrenheit, supper was left blank. The Administrator will be -7/15/24 Breakfast was left blank, and dinner 115 responsible for completing daily degrees Fahrenheit, supper was left blank. audits to ensure the dishwasher -7/16/24 Breakfast was 108 degrees Fahrenheit, wash cycle temperature is dinner was left blank, and supper was left blank. maintained at a minimum of 120 -7/17/24 Breakfast 105 degrees Fahrenheit. degrees Fahrenheit as well as *There were 19 wash, rinse, and chemical sanitation levels (minimum of sanitation level checks missing out of 49 50ppm) are achieved and properly opportunities. documented. The Administrator will *There had been only 2 wash cycle temperatures report these findings to the QAPI recorded at 120 degrees Fahrenheit or higher for Committee monthly for three months then quarterly until the -One on 7/6/24 for 120 degrees Fahrenheit at **QAPI** Committee advises dinner and a second on 7/8/24 for 120 degrees otherwise. Fahrenheit at dinner. *Dishwasher temperatures are completed after 7/19/2024 Completion Date: each meal. *After the fifth wash cycle the dishwasher wash temperature reached 115 degrees Fahrenheit on the machine's external thermometer. Observation and interview on 7/17/24 at 3:34 p.m. with cook I and dietary aide J in the kitchen revealed: *A dishwasher-safe thermometer runs through the dishwasher multiple times recorded temperatures between 100 and 105 degrees Fahrenheit. *Cook I confirmed that the dishwasher machine's external thermometer read the same temperature as the thermometer that had been sent through the dishwasher with each cycle. *Dietary Aide J stated "The wash temperature should be 120 degrees" Fahrenheit. *The dishwasher machine had been serviced monthly by the vendor. Interview on 7/17/24 at 3:49 p.m. with

administrator A revealed.

PRINTED: 07/30/2024 FORM APPROVED South Dakota Department of Health (X1) PROVIDER/SUPPLIER/CLIA (X3) DATE SURVEY STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: _ B. WING 50258 07/18/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 126 W 12TH AVE POST OFFICE BOX 150 EASTERN STAR HOME OF SD ASSISTED LIVING REDFIELD, SD 57469 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) (X4) ID COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX **PREFIX** CROSS-REFERENCED TO THE APPROPRIATE DATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) S 106 S 106 Continued From page 2 *There had been no gastrointestinal illness in the past three months. *She expected dietary staff to notify the dietary manager, the maintenance department, or her when the dishwasher had low-temperature readings. *She had not been notified of any dishwasher low-temperature readings. *The vendor came monthly to service the dishwasher. Review of the 2/28/24 "Regular Service Call" report from the vendor revealed: *"Wash Temperature: 100 Fahrenheit". *"Monitor wash temp for compliance to protect guests, reputations, and machine efficiency." *"Wash temp is hitting 100 degrees". Interview on 7/18/24 7:50 at a.m. with administrator A revealed she: *Had spoke with the vendor's representative and had been reassured that the dishwasher is sanitizing the dishes with the chemicals. *Was aware that the manufacturer's specification stated that the wash temperature minimum was 120 degrees Fahrenheit. *Expected dietary staff to run the dishwasher until it is temping at 120 degrees before running dishes through. Review of the vendor "Installation & Operation

STATE FORM

Manual" revealed:

(MINIMUM) 120"

*"Temperatures: WASH---*F [degrees Fahrenheit]

Review of the providers November 1, 2017

*"Dishes and cookware will be washed and

*"Current dishwasher is a chemical sanitizing

Cleaning Dishes Policy revealed:

sanitized after each meal."

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FORM APPROVED South Dakota Department of Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: _ B. WING 50258 07/18/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 126 W 12TH AVE POST OFFICE BOX 150 EASTERN STAR HOME OF SD ASSISTED LIVING REDFIELD, SD 57469 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) S 201 Continued From page 4 S 201 S 201 General Fire Safety findings. Continued. The Activity Director will be responsible for completing a minimum of 1 spot check per week to ensure that the EXIT signs in the facility are illuminated. The Activity Director will report these findings to the QAPI Committee monthly for three months then quarterly until the QAPI Committee advises otherwise. Completion Date: 8/8/2024