

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>265794</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>03/13/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>HEISINGER LUTHERAN HOME</b>		STREET ADDRESS, CITY, STATE, ZIP <b>1002 WEST MAIN STREET JEFFERSON CITY, MO 65109</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0812  <b>Level of harm</b> - Minimal harm or potential for actual harm  <b>Residents Affected</b> - Many	<p><b>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</b></p> <p>Based on observation, interview and record review, facility staff failed to allow sanitized kitchenware to air dry prior to stacking in storage to prevent the growth of food-borne pathogens. The facility census was 27. 1. Review of the 2017 Food and Drug Administration Food Code, Chapter 4, Section 901.11, showed After cleaning and sanitizing, equipment and utensils: (A) Shall be air-dried or used after adequate draining as specified in the first paragraph of 40 CFR 180.940 Tolerance exemptions for active and inert ingredients for use in antimicrobial formulations (food-contact surface sanitizing solutions), before contact with food; and (B) May not be cloth dried except that utensils that have been air-dried may be polished with cloths that are maintained clean and dry. 2. Observation on 0[DATE] at 10:03 A.M., showed eight small metal food preparation pans stacked together wet on the countertop next to the food processing station. Further observation showed Cook A removed pans from the stack and placed pureed foods prepared for service to residents at the noon meal in the pans. 3. Observation on 0[DATE] at 10:06 A.M., showed Dietary Aide (DA) B removed three food processors from the clean side of the mechanical dishwashing station while wet and placed them on the countertop in the upright position in the food processing station. Further observation showed two metal food preparation pans stacked together wet on the lower shelf in the cook's station. 4. Observation on 0[DATE] at 11:03 A.M., showed DA B removed a metal food preparation pan from the clean side of the mechanical dishwashing station while wet and stacked it on top of other pans on the lower shelf of cook's station. 5. Observation on 03/11/20 at 11:46 A.M., showed 10 metal food preparation pans stacked together wet on the lower shelf in the cook's station. 6. Observation on 03/11/20 at 11:52 A.M., showed four small metal food preparation pans stacked together wet on the counter top in the food processing station. 7. During an interview on 03/11/20 at 11:53 A.M., DA C said dishes should be air dried before they are stacked in storage. 8. Observation on 03/11/20 at 11:56 A.M., showed DA C, picked up a stack of metal sheet pans from the clean side of the mechanical dishwashing station and stacked them together while wet. Further observation showed water streamed out from the bottom of the stack as the DA attempted to put the pans away. During an interview on 03/11/20 at 11:57 A.M., the DA said the pans had been sitting on the clean side of the station for a while and he/she thought they would be dry. The DA said he/she did not look at the pans before he/she stacked them together. 9. During an interview on 03/11/20 at 12:48 P.M., the Dietary Supervisor said the facility did not have a written policy for dishwashing procedures, but all staff are trained to allow dishes to drain and air dry before they are put away. 10. During an interview on 03/11/20 12:49 P.M., the administrator said the facility does not have a dishwashing policy. The administrator said staff should allow dishes to air dry unstacked before they are put away.</p>		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE		TITLE	(X6) DATE

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.