STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	29084	A. BUILDING: _____ B. WING _____	03/03/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MCCRITE PLAZA AT BRIARCLIFF ASSISTED LIVING	1201 NW TULLISON RD KANSAS CITY, MO 64116

(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) COMPLETE DATE
A2257	19 CSR 30-86.022(10)(B) Combustible Materials, Unnecessary Storage Of Protection from Hazards. (B) The storage of unnecessary combustible materials in any part of a building in which a licensed facility is located is prohibited. I/II This regulation is not met as evidenced by: Class II Based on observation and interview, the facility failed to keep unnecessary combustibles properly secured while stored in the facility. This violation had the potential to affect all assisted living residents. The census was 89. Observation on 03/03/26 at 11:20 A.M. of the basement level food storage area showed there were four bottles of charcoal lighter fluid, three closed bottles stored on a metal shelf and one opened bottle on top of the ice machine. During an interview on 03/03/26 at 11:24 A.M., the Director of Dining Services said the bottles of charcoal lighter fluid should be stored in the fire box. During an interview on 3/3/2026 at 2:59 P.M., the Administrator said he/she agreed with the Director of Dining Services that the bottles of charcoal lighter fluid should be stored in the fire box.	A2257		
A7003	19 CSR 30-87.030(3) Clean Clothing, Hair Restraints The outer clothing of all employees shall be clean and employees shall use effective hair restraints to prevent the contamination of food or food-contact surfaces. III	A7003		

Missouri Department of Health and Senior Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	29084	A. BUILDING: _____ B. WING _____	03/03/2026

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A2257	19 CSR 30-86.022(10)(B) Combustible Materials, Unnecessary Storage Of Protection from Hazards. (B) The storage of unnecessary combustible materials in any part of a building in which a licensed facility is located is prohibited. I/II This regulation is not met as evidenced by: Class II Based on observation and interview, the facility failed to keep unnecessary combustibles properly secured while stored in the facility. This violation had the potential to affect all assisted living residents. The census was 89. Observation on 03/03/26 at 11:20 A.M. of the basement level food storage area showed there were four bottles of charcoal lighter fluid, three closed bottles stored on a metal shelf and one opened bottle on top of the ice machine. During an interview on 03/03/26 at 11:24 A.M., the Director of Dining Services said the bottles of charcoal lighter fluid should be stored in the fire box. During an interview on 3/3/2026 at 2:59 P.M., the Administrator said he/she agreed with the Director of Dining Services that the bottles of charcoal lighter fluid should be stored in the fire box.	A2257		
A7003	19 CSR 30-87.030(3) Clean Clothing, Hair Restraints The outer clothing of all employees shall be clean and employees shall use effective hair restraints to prevent the contamination of food or food-contact surfaces. III	A7003		

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A7003	Continued From page 1 This regulation is not met as evidenced by: Class III Based on observation and interview the facility failed to ensure all employees used effective hair restraints when three employees (Cook A , Server A, and the Director of Dining Services) did not wear hair restraints while performing duties in the kitchen. This could have affected all residents. The facility census was 89. The facility did not provide a hair restraint policy. 1. Observations on 03/03/26 at 11:10 A.M., showed: -Cook A prepared food near the grill and did not have his/her hair in a restraint; -Dietary Aide A prepared individual bowls of cake without his/her hair in a restraint; -The Director of Dining Services stood in the food preparation area and talked with kitchen staff without his/her hair in a restraint. During an interview on 03/03/26 at 11:35 A.M., the Director of Dining Services said all staff should wear a hair restraint at all times while in the kitchen. During an interview on 03/03/26 at 2:59 P.M., the Administrator said he/she expected all staff to wear a hair restraint at all times while in the kitchen.	A7003		
A7015	19 CSR 30-87.030(13) Food-Protected, Temp, Need to Contact DHSS At all times, including while being stored, prepared, displayed, served or transported to or	A7015		

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A7015	Continued From page 2 from the facility, food shall be protected from potential contamination, including dust, insects, rodents, unclean equipment and utensils, unnecessary handling, coughs and sneezes, flooding, drainage and overhead leakage or overhead drippage from condensation. The temperature of potentially hazardous food shall be forty-five degrees Fahrenheit (45°F) or below or one hundred forty degrees Fahrenheit (140°F) or above at all times, except as otherwise provided in this section. In the event of a fire, flood, power outage or similar event that might result in the contamination of food, or that might prevent potentially hazardous food from being held at required temperatures, the person in charge shall immediately contact the Department of Health and Senior Services (the department). Upon receiving notice of this occurrence, the department shall take whatever action that it deems necessary to protect the residents. II/III This regulation is not met as evidenced by: Class II *Higher class merited due to extent of violation. Based on observation and interview facility staff failed to prepare food in a manner to prevent potential contamination and/or spoilage This had the potential to affect all residents. The facilty census was 89. The facility did not provide a policy regarding food preparation. 1. Observation on 03/03/26 at 11:00 A.M. of the kitchen showed: -Two large pans with two large, prepared, loaves	A7015		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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A7015	Continued From page 3	A7015		

of raw meat in each pan sitting on a rolling cart in the food preparation area;
-Neither pan was covered;
-There was also a second rolling cart with a zippered food storage bag containing approximately three pounds of ground beef, a plastic container of shredded cabbage, a plastic container of celery, a bag of baby carrots, and a plastic container of diced onions;
-There was not a staff member anywhere near the rolling carts of food.

Observation on 3/3/2026 at 11:25 A.M. of the kitchen showed:
-Both rolling carts and the food items on them were still sitting in the same place and did not appear to have been touched;
-The temperature of the prepared, raw, meatloaf was 57.6° Fahrenheit (F);
-The temperature of the zippered food storage bag of raw ground beef was 51° F;
-The temperature of the shredded cabbage was 63° F;
-The temperature of the celery was 67.6° F.

During an interview on 03/03/26 at 11:30 A.M., Cook B said:
-He/She pulled the cabbage, celery, carrots, and onions out of the refrigerator to prepare a salad for the next day;
-He/She pulled the vegetables from the refrigerator about an hour ago;
-He/She left the vegetables on the cart unattended in room temperature;
-He/She knew cold food had to be kept below 45° F to be kept from spoiling.

During an interview on 03/03/26 at 11:40 A.M., Chef A said:
-He/She had been preparing meatloaf for the next

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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(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) COMPLETE DATE
A7015	Continued From page 4 day; -He/She left the kitchen to go on a break; -He/She did not think he/she needed to put the food away prior to going on a break; -He/she knew cold food should be kept below 45° F. During an interview on 03/03/26 at 11:44 A.M., the Director of Dining Services said: -He/She knew cold food should be kept below 45° F to prevent spoilage. -He/She expected staff to cover and put food in the refrigerator if they intend to take a break while preparing food. During an interview on 03/03/26 at 2:59 P.M. the Administrator said: -He/She expected all food intended to be cold, to be kept below 45° F during preparation and storage to prevent spoilage; -He/She expected all food not currently being prepared or served to be covered to prevent contamination; -He/She would have expected Cook B and Chef A to cover and place the food they were preparing in the refrigerator prior to leaving the kitchen to ensure they were free from spoiling temperatures and contamination.	A7015		
A7017	19 CSR 30-87.030(15) Food-Stored Above the Floor, Protected Containers of food shall be stored above the floor in a manner that protects the food from splash and other contamination and that permits easy cleaning of the storage area, except that metal pressurized beverage containers, and cased food packaged in cans, glass or other waterproof containers need not be elevated when the food	A7017		

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A7017	Continued From page 5 container is not exposed to floor moisture; and containers may be stored on dollies, racks or pallets, provided the equipment is easily movable. III This regulation is not met as evidenced by: Class III Based on observation and interview, the facility failed to ensure food was stored above the floor in a manner that protects the food from splash and other contamination when food was stored on the floor of the walk-in freezer and two large bags of rice were on the floor in the dry food storage area. The facility census was 89. The facility did not provide a food storage policy. 1. Observation on 3/3/2026 at 11:17 A.M. of the walk-in freezer showed five boxes of food being stored on the floor, including: -Two large buckets of ice cream; -One box of peas and carrots; -Two boxes of pork shoulder roasts. During an interview on 03/03/26 at 11:40 A.M., the Director of Dining Services said food should not be stored on the floor of the walk-in freezer. During an interview on 03/03/26 at 2:59 P.M. the Administrator said he/she expected food to be stored off the floor to prevent contamination.	A7017		
A7089	19 CSR 30-87.030(87) Glasses/Cups/Utensils Storage Glasses and cups shall be stored inverted. Other stored utensils shall be covered or inverted, wherever practical. Facilities for the storage of	A7089		

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A7089	Continued From page 6	A7089		

knives, forks and spoons shall be designed and used to present the handle to the employee or consumer. Unless tableware is prewrapped, holders for knives, forks and spoons at self-service locations shall protect these articles from contamination and present the handle of the utensil to the consumer. III

This regulation is not met as evidenced by:
Class III

Based on observation and interview, the facility failed to ensure all glasses, dishware, cups, and utensils were stored inverted and in a manner that protected them from contamination. This had the potential to affect all residents. The facility census was 89.

The facility did not provide a policy regarding storage of glasses and dishware in the kitchen.

1. Observation of the main kitchen on 03/03/26 at 11:00 A.M. showed:
-All stacks of plates on the wire shelving near the sinks were placed upright;
-Stacks of plates and bowls on the shelf under the preparation table were placed upright.

2. Observation of the 3rd floor kitchen on 03/03/26 at 11:15 A.M. showed a tray of glassware placed upright.

During an interview on 03/03/26 at 11:40 A.M., the Director of Dining Services said all all glassware and dining ware should be stored inverted to prevent splash and splatter contaminating it.

During an interview on 03/03/26 at 2:59 P.M. the Administrator said he/she expected all dining

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A7089	Continued From page 7 ware and glassware to be stored inverted.	A7089		

Plan of Correction
Dietary Services Department
McCrite Plaza at Briarcliff
State Survey – March 2026

Tag A2257
19 CSR 30-86.022 (10) (B) Combustible Materials, Unnecessary Storage Of Protection from Hazards.

(B) The storage of unnecessary combustible materials in any part of the building in which a licensed facility is located is prohibited. I/II

This regulation is not met as evidenced by:
Class II

Based on observation and interview, the facility failed to keep unnecessary combustibles properly secured while stored in the facility. This violation had the potential to affect all assisted living residents. The census was 89.

Observation on 03/03/26 at 11:20 a.m. of the basement level food storage area showed there were four bottles of charcoal lighter fluid. Three closed bottles stored on a metal shelf and one opened bottle on top of the ice machine.

During an interview on 03/03/26 at 11:24 a.m. the Director of Dining Services said the bottles of charcoal lighter fluid should be stored in the fire box.

During an interview on 03/03/26 at 2:59 p.m., the Administrator said he/she agreed with the Director of Dining Services that the bottles of fluid should be stored in the fire box.

Plan of Correction:
1. How Deficient Practice Was Corrected
The charcoal lighter fluid identified during the survey was immediately removed from the food storage area and placed in the designated fire safety storage box.
2. How Other Areas Were Protected
All dietary staff were re-educated by the Director of Dining Service or the Assistant Manager regarding proper storage of chemicals and non-food items.
3. Systemic Changes Implemented
Staff were instructed by Director of Dining Service or the Assistant Manager that chemicals and non-food items must be stored in designated areas away from food, food preparation areas, and food-contact items.
4. Monitoring Plan
The Director of Dining Services or designee will conduct routine inspections weekly of storage areas to ensure compliance.

All residents could have been affected

Date of Compliance: 04/10/2026**Tag A7003**
Continued From page 1
This regulation is not met as evidenced by: Class III

Based on observation and interview, the facility failed to ensure all employees used effective hair restraints when three employees (Cook A, Server A, and the Director of Dining Services) did not wear hair restraints while performing duties in the kitchen. This could have affected all residents.
The facility census was 89.

The facility did not provide a hair restraint policy.

1. Observations on 03/03/26 at 11:10 a.m., showed:
    a. Cook A prepared food near the grill and did not have his/her hair in a restraint.
    b. Dietary Aide A prepared individual bowls of cake without his/her hair in a restraint.
    c. The Director of Dining Services stood in the food preparation area and talked with kitchen staff without his/her hair in a restraint.
2. During an interview on 03/03/26 at 11:35 a.m. the Director of Dining Services said all staff should always wear a hair restraint while in the kitchen.
3. During an interview 03/03/26 at 2:59 p.m., the Administrator said he/she expected all staff to always wear a hair restraint while in the kitchen.

Plan of Correction:
1. How Deficient Practice Was Corrected
Staff observed without appropriate hair restraints were immediately instructed by management to place proper hair coverings prior to continuing work
2. How Other Areas Were Protected
All dietary staff received re-education by Director of Dining Service or the Assistant Manager regarding hair restraint requirements in food service areas.
3. Systemic Changes Implemented
The facility implemented the following measures:

- A written Hair Restraint Policy has been developed and implemented for the Dietary Department. A copy of the policy is attached.
- Hair nets, hats, or approved hair restraints are now required for all dietary staff working in food preparation or service areas
- Staff were notified verbally and in writing of this requirement by the Director of Dining Service or the Assistant Manager
- Approved hats may be worn in line with company standard.

4. Monitoring Plan
The Director of Dining Services, or designee will conduct daily uniform and appearance checks to verify compliance. Noncompliance will result in immediate correction and progressive disciplinary action as necessary. All residents could have been affected.

Date of Compliance: 04/10/26

Tag A7015
19 CSR 30-87.030(13) Food-Protected, Temp, Need to Contact DHSS

At all times, including while being stored, prepared, displayed, served or transported to or from the facility, food shall be protected from potential contamination, including dust, insects, rodents, unclean equipment and utensils, unnecessary handling, coughs and sneezed, flooding, drainage and overhead drippage from condensation. The temperature of potentially hazardous food shall always be forty-five degrees Fahrenheit 45 degrees or below one hundred forty degrees (140 degrees) or above, except as otherwise provided in this section. In the event of a fire, flood, power outage or similar events that might result in the contamination of food, or that might prevent potentially hazardous food from being held at required temperatures. The person in charge shall immediately contact the Department of Health & Senior Services (the department. Upon receiving notice of this occurrence, the department shall take whatever action that it deems necessary to protect the residents. II/III

This regulation is not met as evidenced by:
Class II
*Higher class merited due to extent of violation.

Based on observation and interview facility staff failed to prepare food in a manner to prevent potential contamination and/or spoilage. This had the potential to affect all residents. The facility census was 89.

The facility did not provide a policy regarding food preparation.

1. Observation on 03/03/26 at 11:00 a.m. of the kitchen showed:
    a. Two large pans with two large, prepared loaves of raw meat in each pan sitting on a rolling cart in the food preparation area.
        i. Neither pan was covered.
        ii. There was also a second rolling cart with a zippered food storage bag containing approximately three pounds of ground beef, a plastic container of shredded cabbage, a plastic container of celery, a bag of baby carrots, and plastic container of diced onions.
        iii. There was not a staff member anywhere near the rolling carts of food.
2. Observation on 3/3/2026 at 11:25 a.m. of the kitchen showed:
    a. Both rolling carts and food items on them were still sitting in the same place and did not appear to have been touched.
        i. The temperature of the prepared, raw, meatloaf was 57.6 degrees Fahrenheit (F)
        ii. The temperature of the zippered food storage bag of the raw ground beef was 51 degrees Fahrenheit (F);
        iii. The temperature of the shredded cabbage was 63 degrees F;
        iv. The temperature of the celery was 67.6 degrees F.
3. During an interview on 03/03/26 at 11:30 a.m. Cook B said:
    a. He/She pulled the cabbage, celery, carrots and onions out of the refrigerator to prepare a salad for the next day.
    b. He/She pulled the vegetables from the refrigerator about an hour ago.
    c. He/She left the vegetables on the cart unattended in room temperature.
    d. He/She knew cold food had to be kept below 45-degree F to be kept from spoiling.
4. During an interview on 03/03/26 at 11:40 a.m., Chef A said:
    a. He/She had been preparing meatloaf for the next day.
    b. He/She left the kitchen to go on a break.
    c. He/She did not think he/she needed to put the food away prior to going on a break.

d. He/She knew cold food should be kept below 45 degrees F to prevent spoilage.

5. During an interview on 03/03/26 at 11:44 a.m. the Director of Dining Services said:
    a. He/She knew cold food should be kept below 45 degrees F to prevent spoilage.
    b. He/She expected staff to cover and put food in the refrigerator if they intend to take a break while preparing food.
6. During an interview on 03/03/26 at 2:59 p.m. the Administrator said:
    a. He/She expected all food intended to be cold, to be kept below 45 degrees F during preparation and storage to prevent spoilage.
    b. He/She expected all food not currently being prepared or served to be covered to prevent contamination.
    c. He/She would have expected Cook B and Chef A to cover and place the food they were preparing in the refrigerator prior to leaving the kitchen to ensure they were free from spoiling temperatures and contamination.

Plan of Correction:

1. How Deficient Practice Was Corrected

The food items identified during the survey that were outside of safe temperature control were immediately discarded. Staff involved were immediately re-educated by management on safe food handling procedures, including monitoring of Time/Temperature Control for Safety (TCS) foods during preparation, holding, and service to ensure proper temperature control.

2. How Other Areas Were Protected

All dietary staff received re-education by the Director of Dining Service or the Assistant Manager regarding proper temperature control procedures for TCS foods. Staff were instructed by the Director of Dining Service or the Assistant Manager that food items may not remain at room temperature outside approved time limits and must be monitored during preparation and service.

3. Systemic Changes Implemented

The facility implemented the following corrective actions:

- A Food Preparation and Temperature Control Policy has been developed and implemented. Staff were educated on the policy and a copy is attached.
- Reinforcement of temperature monitoring procedures for all hot and cold holding equipment
- Implementation and review of temperature logs for equipment and food holding
- Reinforcement of staff responsibilities for monitoring food temperatures during meal preparation and service
- Increased supervisory oversight during meal preparation periods

4. Monitoring Plan

The Director of Dining Services or designee will review temperature monitoring logs daily. Random spot checks of food temperatures will be conducted during meal service and preparation periods to ensure compliance. All residents could have been affected.

Date of Compliance

04/10/2026

Tag A7017
19CSR 30-87.030(15) Food-Stored Above the Floor, Protected

Containers of food shall be stored above the floor in a manner that protects the food from splash and other contamination and that permits easy cleaning of the storage area, except that metal pressurized beverage containers, and cased food packaged in cans, glass or other waterproof containers need not be elevated when the food container is not exposed to floor moisture; and containers may be stored on dollies, racks or pallets, provided the equipment is easily movable. III

This regulation is not met as evidenced by:
Class III

Based on observation and interview, the facility failed to ensure food was stored above the floor in a manner that protects the food from splash and other contamination when food was stored on the floor of the walk-in freezer, and two large bags of rice were on the floor in the dry food storage area. The facility census was 89.

The facility did not provide a food storage policy.

1. Observation on 3/3/2026 at 11:17 a.m. of the walk-in freezer showed five boxes of food being stored in the floor, including:
    a. Two large buckets of ice cream.
    b. One box of peas and carrots.
    c. Two boxes of pork shoulder roasts.
2. During an interview on 3/3/26 at 11:40 a.m., the Director of Dining Services said food should not be stored on the floor of the walk-in freezer.
3. During an interview on 3/3/26 at 2:59 p.m. the Administrator said he/she expected food to be stored off the floor to prevent contamination.

Plan of Correction:
1. How Deficient Practice Was Corrected
Items observed stored on the floor were immediately relocated to appropriate shelving.
2. How Other Areas Were Protected
All dietary staff were re-educated by the Director of Dining Service or the Assistant Manager, that food, supplies, and single-service items must be stored at a minimum of six inches off the floor.
3. Systemic Changes Implemented
The facility reinforced food storage requirements in all areas including:

- Dry storage areas
- Refrigeration units
- Freezers
- Food preparation areas
- Staff were instructed that items may not be staged on the floor at any time.
- A Food Storage Policy has been developed and implemented to ensure food is stored properly and protected from contamination. A copy of the policy is attached.

4. Monitoring Plan
The Director of Dining Services or designee will perform routine kitchen inspections to verify compliance with storage requirements.

Date of Compliance
04/10/2026

Tag A7089
19 CSR 30-87.030(87) Glasses/Cups/Utensils Storage

Glasses and cups shall be stored inverted. Other stored utensils should be covered or inverted, wherever practical. Facilities for the storage of knives, forks and spoons shall be designed and used to present the handle to the employee or consumer. Unless tableware is prewrapped, holders for knives, forks and spoons at self-service locations shall protect these articles from contamination and present the handle of the utensils to the consumer. III

This regulation is not met as evidenced by:
Class III

Based on observations and interviews, the facility failed to ensure all glasses, dishware, cups and utensils were stored inverted and in a manner that protected them from contamination. This had the potential to affect all residents. The facility census was 89.

1. Observation of the main kitchen on 03/03/26 at 11:00 a.m. showed:
    a. All stacks of plates on the wire shelving near the sinks were placed upright.
    b. Stacks of plates and bowls on the shelf under the preparation table were placed upright.
2. Observation of the 3rd floor kitchen on 03/03/26 at 11:15 a.m. shored a tray of glassware placed upright.
3. During an interview on 03/03/26 at 11:40 a.m., the Director of Dining Services said all glassware and dining ware should be stored inverted to prevent splash and splatter contaminating it.
4. During an interview on 03/03/26 at 2:59 p.m., the Administrator said he/she expected all dining ware and glassware to be stored inverted.

Plan of Correction:
1. How Deficient Practice Was Corrected
Dishware and glassware observed stored upright during the survey were immediately inverted and properly stored.
2. How Other Areas Were Protected
All dietary staff were re-educated Director of Dining Service or the Assistant Manager by the on proper storage procedures for clean dishes and food-contact items.
3. Systemic Changes Implemented
Staff were instructed that:
- Plates must be stored upside down
- Utensils must be stored in protected containers
- Single-service items must be protected from contamination

4. Monitoring Plan
The Director of Dining Services or designee will conduct daily spot checks of dish storage areas to ensure proper storage procedures are followed. All residents could have been affected.

Date of Compliance
04/10/26

Quality Assurance and Performance Improvement (QAPI) Oversight

To ensure ongoing compliance, the Dietary Department will incorporate the monitoring of food safety, sanitation, and regulatory compliance into the facility's Quality Assurance and Performance Improvement (QAPI) program.

The Director of Dining Services will conduct routine audits of:

- Food temperature logs
- Equipment temperature logs
- Food storage practices
- Personal hygiene and hair restraint compliance
- Chemical storage practices

These audits will be conducted weekly for four weeks, then quarterly thereafter to ensure continued compliance.

Any identified concerns will be addressed immediately through:

- Staff re-education
- Corrective coaching
- Progressive disciplinary action if necessary.

Results of these audits will be reviewed with facility leadership to ensure sustained compliance with food safety regulations.