

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 265740	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/13/2025
NAME OF PROVIDER OR SUPPLIER Avenir at Maple Grove		STREET ADDRESS, CITY, STATE, ZIP CODE 2407 Kentucky Street Louisiana, MO 63353	
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)		
<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>Based on observation, interview and record review, the facility failed to provide food items at a safe and appetizing temperature. Five residents (Resident #4, #3, #2, #1 and #5), of five sampled residents, reported staff served foods in the dining room and resident rooms that should be hot at service, cold. The issue had been reported repeatedly through the Resident Council with no resolution. The facility census was 58. Review of the facility policy, Food Safety Requirements, last reviewed/ revised 09/25/23, showed the following: -It is the policy of this facility to procure food from sources approved or considered satisfactory by federal, state and local authorities. Food will also be stored, prepared, distributed and served in accordance with professional standards for food service safety; -Holding: staff shall monitor food temperatures while holding for delivery to ensure proper hot and cold holding temperatures are maintained. Staff shall refer to the current FDA Food Code; -Food and beverages shall be distributed and served to residents in a manner to prevent contamination and maintain food at the proper temperature and out of the Danger Zone. Strategies include but are not limited to timely distribution of all meals/snacks. The facility did not provide a policy related to food temperatures following request. 1. Review of the Resident Council meeting minutes showed the following: -On 09/02/25: Dietary: residents reported the food served was cold or burnt; -The meeting minutes showed no documented follow up after this concern; -On 10/6/25: Dietary: residents reported they still received cold food; -The meeting minutes showed no documented follow up after this concern; -On 11/03/25: Dietary: residents reported food was still cold; -The meeting minutes showed no documented follow up after this concern. 2. Review of the dietary Temperature Record for November 2025, showed no food temperature recordings for breakfast, lunch and dinner for the following dates: 11/10, 11/11, 11/12, and 11/13. 3. Observation on 11/13/25 showed the following: -At 12:00 P.M., staff, to include administration, served lunch trays to residents in the dining room. Dietary staff served individual trays from a window in the kitchen to waiting staff on the outside of the window. One tray went out at a time; the plates on the tray were covered with a plastic domed lid with no plate warmer; -At 12:45 P.M., staff, to include administration, served lunch trays to residents on the south hall; the plates were covered with a plastic domed lid and sat on a tray, without a plate warmer; -At 1:00 P.M., staff served the last hall tray on the south hall. Observation of food temperatures for the test tray on 11/13/25 at 1:00 P.M. from the south hall, taken with a metal stem type thermometer, showed the following: -Tuna noodle casserole: 106.0 degrees Fahrenheit; -Lima beans: 84.0 degrees Fahrenheit; -Ice Cream in a Styrofoam container: liquefied on the top and around the sides (the Styrofoam ice cream cup had not been kept in a tray of ice prior to service and had partially melted). 4. Observation on 11/13/25 showed the following: -At 5:30 P.M., staff, to include administration, served supper trays to residents in the dining room. Dietary staff served individual trays from a window in the kitchen to waiting staff on the outside of the window. The plates were covered with a plastic domed lid and sat on a tray, without a plate warmer; -At 5:45 P.M., staff served supper trays to</p> <p>(continued on next page)</p>		

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>residents on the north hall; the supper trays were served from a mobile food cart; the plates were covered with a plastic domed lid, but were not on a plate warmer; -At 6:00 P.M., facility staff served the last hall tray on the north hall. Observation of the food temperatures for the test tray on 11/13/25 at 6:00 P.M. from the north hall, taken with a metal stem type thermometer, showed the following: -Macaroni and cheese: 95.0 degrees Fahrenheit; -Green beans with mushrooms and onions: 80.0 degrees Fahrenheit. 5. During an interview on 11/13/25 at 11:00 A.M., Resident #4 said the following: -He/She always eats in the dining room; -The food was usually cold, he/she expected it to be hot, but it never was. 6. During an interview on 11/13/25 at 11:45 A.M., Resident #3 said the following: -He/She eats in the dining room and in his/her room at times; -The food was always cold; -He/She was the president of the Resident Council, and many residents had complained about the food being cold for a while, but nothing had been done; -When he/she ate in the dining room, the food at best was lukewarm. 7. During an interview on 11/13/25 at 1:45 P.M., Resident #2 said the following: -He/She eats in the dining room at times; usually he/she ate in his/her room; -The food was cold regardless of where it was served. 8. During an interview on 11/13/25 at 2:20 P.M., Resident #1 said the following: -He/She always eats in his/her room; -The food was never hot; all meals served were cold; -Today's lunch was cold; -He/She told staff before his/her food was cold, but staff did not offer to reheat the meal. 9. During an interview on 11/13/25 at 4:40 P.M., Resident #5 said the following: -He/She always eats in the dining room and the food was cold; -It did not matter which meal was served; all meals were cold; -Most of the time he/she did not ask staff to reheat his/her food, but last week the facility served soup, and it was cold, so he/she asked staff to reheat the soup. 10. During an interview on 11/13/25 at 3:25 P.M., Certified Nurse Assistant (CNA) B said the following: -CNA staff were responsible to pass trays at mealtimes to residents in the dining room and resident rooms; -Residents complained about food being cold, whether they ate in the dining room or in their room. 11. During an interview on 11/13/25 at 3:35 P.M., Dietary [NAME] A said the following: -He/She was not aware residents complained of cold food; -If food was returned to be reheated, it was usually just soup; -Dietary staff were responsible to check food temperatures before serving a meal; -He/She just started as a cook and was not aware of what the food temperatures should be. 12. During an interview on 11/13/25 at 5:15 P.M., the facility Activity Director said the following: -He/She was responsible for Resident Council Meetings; -Several residents complained about the food being cold during the last few resident council meetings; -He/She reported the residents' complaints of cold food to the dietary manager and the facility administrator; -He/She was not sure what interventions were put in place to prevent the food from being cold; -The last resident council meeting was on 11/03/25 and the residents in attendance still complained of cold food. 13. During an interview on 11/13/25 at 5:30 P.M., Licensed Practical Nurse (LPN) C said the following: -Residents complained of cold food all the time; -Resident #1 and his/her family used to complain all of the time about cold food; staff were told by administration to deliver Resident #1's meal tray first from the hall cart, but no other interventions for other residents were initiated. 14. During an interview on 11/13/25 at 06:50 P.M., the administrator said the following: -He was aware residents complained of food being cold; -The facility received a new steam table in the last two weeks so he thought that would help; -Dietary staff were responsible for recording food temperatures; -He was not aware food temperature logs had not been completed by dietary staff for November 10th, 11th, 12th, or 13th. MO#2665567</p>		