

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 285269	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/12/2025
NAME OF PROVIDER OR SUPPLIER Beaver City Manor		STREET ADDRESS, CITY, STATE, ZIP CODE 905 Floyd Street Beaver City, NE 68926	

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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>Licensure Reference Number 175 NAC 12-006.11(E)</p> <p>Based on observation, record review, and interview the facility failed to ensure that the facility dishwasher operated in the required temperature range to sanitize dishware. This affected all facility residents. The facility census was 23.</p> <p>Findings are:</p> <p>Record review of the Nebraska Food Code, effective date 7/21/16, section 4-501.110(B) revealed that the temperature of the wash solution in spray-type dishwashers that use chemicals to sanitize may not be less than 120&deg; Fahrenheit (F).</p> <p>Record review of the facility dishwasher manufacturer product guide dated 2009 revealed that the facility dishwasher is a low temperature chemical sanitization washer. The product guide revealed that the wash operating temperature is required to be 120 degrees F minimum.</p> <p>Observation on 6/10/25 at 8:43 AM in the facility kitchen revealed that the dishwasher temperature log was taped on the front of the dishwasher. The log had spaces to document the AM and PM temperatures of the dishwasher water daily. The log noted that the temperature is to be 120 degrees F or above. Staff are to notify maintenance if the temperature is not 120 degrees F or above.</p> <p>Observation on 6/10/25 at 9:07 AM in the facility kitchen revealed that Dietary Aide (DA)-I was rinsing dishware and placing it into the dishwasher. DA-I started the dishwasher. The water temperature during the wash cycle was 96 degrees F. The rinse cycle temperature reached 133 degrees F.</p> <p>Observation on 6/10/25 in the facility kitchen at 10:54 AM revealed that Dietary [NAME] (DC)-C placed a load of dishes in the dishwasher. The wash cycle water temperature reached 104 degrees F and a rinse temperature of 140 degrees F. This surveyor asked DC-C what the wash temperature was required to be. DC-C revealed that DC-C had just started and was not sure.</p> <p>Observation on 6/10/25 at 1:35 PM in the facility kitchen with the Dietary Supervisor (DS) observed a dish wash cycle for the dishwasher. The wash temperature reached 104 degrees F and fluctuated between 103 degrees F and 104 degrees F. The DS confirmed that the facility dishwasher is a low temperature chemical sanitizing dishwasher. The DS confirmed that the wash temperature was only 104 degrees F and did not reach the required temperature of 120 degrees F or above.</p> <p>Interview on 6/10/25 at 2:19 PM with the Facility Administrator (FA) revealed that the</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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>representative from the company that maintains and services the facility dishwasher was in the facility in May 2025. The FA noted that the representative revealed that the wash cycle temperature of the dishwasher was 125 degrees F and the rinse cycle water temperature was 140 degrees F. The FA revealed that the FA talked with the representative per phone and that it is likely that a booster for heating water is out. The FA revealed a plumber would be in to take a look at the situation today or first thing in the morning.</p> <p>Interview on 6/10/25 at 4:47 PM with the FA revealed the facility would use paper products for food service tonight and at breakfast as the plumber would be in the facility in the morning. FA revealed that they are using the 3 compartment sink to wash cookware to ensure sanitization.</p> <p>Observation on 6/11/25 at 8:02 AM in the facility dining room revealed that DA-I and DC-C served resident breakfast meals to residents in the dining room. The meals were being served on the regular facility orange plates. Beverages were served in the usual facility reusable plastic coffee cups and beverage glasses.</p> <p>Interview on 6/11/25 at 8:07 AM with DC-B revealed that DC-B was told yesterday that they would be using paper plates and paper ware for meals until the dishwasher was fixed. DC-B revealed that DC-B got a call around 9:30 PM last night letting them know that the dishwasher was fixed. DC-B revealed that they had to run the dishwasher and record both the wash and rinse cycle temperatures. DC-B revealed that the wash temperature was 134 degrees F or something.</p> <p>Observation on 6/11/25 at 9:23 AM in the facility kitchen revealed that DA-I rinsed dishware and placed a rack of dishware in the dishwasher. The wash cycle temperature reached a high of 84 degrees F. The rinse cycle water temperature was 142 degrees F. This surveyor asked DA-I to run the load through the dishwasher again. The wash cycle temperature topped at 110 degrees F. This surveyor notified DC-B of the dishwasher wash cycle not reaching 120 degrees F or above. DC-B had DA-I run the load through the dishwasher again. The wash temperature topped at 112 degrees F.</p> <p>Observation on 6/11/23 at 9:29 AM with the Facility Administrator (FA) in the kitchen revealed that DA-I started a load of dishware in the dishwasher. The wash temperature reached a high of 112 degrees F. The FA stopped the cycle and instructed dietary staff to resume the use of paper products for meals until the dishwasher can be looked at again. The FA confirmed that the wash temperature was not at the required temperature of 120 degrees F or above to ensure sanitation of the dishware.</p> <p>Interview on 6/12/25 at 8:19 AM with the FA confirmed that the facility does not have a policy for use and monitoring of the dishwasher. The FA confirmed that the facility follows the dishwasher manufacturer product guide. The FA confirmed that the dishwasher is required to operate the wash cycle with a temperature of 120 degrees F or above to ensure sanitation.</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide and implement an infection prevention and control program.</p> <p>Licensure Reference Number 175 NAC 12-006.04(A)(ii)</p> <p>Licensure Reference Number 175 NAC 12-006.18(D)</p> <p>Based on observation, record review, and interview the facility failed to ensure that pre-employment health history screens were completed to prevent the potential for the spread of infectious diseases for 5 of 5 staff reviewed. This had the potential to affect all facility residents. The facility failed to ensure that staff performed hand sanitization (hand washing using soap and water or an alcohol-based hand rub (ABHR) to remove germs for reducing the risk of transmitting infection among patients and health care personnel) as required to prevent the potential for cross contamination during delivery of room meals. This affected 1 resident (Resident 18) of 3 residents observed. The facility census was 23.</p> <p>Findings are:</p> <p>A.</p> <p>Record review of the undated facility Orientation Checklist revealed that it contained tasks and record requirements to be completed for new employees. The checklist included the requirement for the completion of the Pre-Employment Questionnaire (pre-employment health screen).</p> <p>Interview on 6/11/25 at 1:37 PM with the facility Business Office Manager (BOM) confirmed that the Pre-Employment Questionnaire on the Orientation Checklist is the Pre-Employment Health Screen. The BOM confirmed that on hire the new employee was to fill out the facility Pre-Employment Health Screen (a 2 page form). The BOM revealed that the employee fills out the front side (page 1) of the form and the back side of the form (page 2). The BOM confirmed that page 2 of the form is where the employee signs and dates the form to confirm that the information is correct. The BOM confirmed that the BOM reviews the information on the form. The BOM confirmed that the Pre-Employment Health Screen has a line for the supervisor to sign and date that the form was reviewed on page 2 of the form. The BOM confirmed that the Pre-Employment Health Screen is to be completed before the employee begins working in the facility.</p> <p>Record review of the undated and untitled list of facility employees revealed that Nurse Aide (NA)-E had a hire date of 3/18/25.</p> <p>Record review of the employee file for NA-E revealed that it contained a Pre-Employment Health Screen for NA-E. The health screen did not have page 2 of the form. There was no signature and no date documenting the date the health screen was completed. There was no page 2 for the BOM to document the review of the health screen.</p> <p>Interview on 6/11/25 at 1:37 PM with the facility BOM confirmed that the Pre-Employment Health Screen for NA-E did not contain page 2 and was not dated or signed by NA-E as required. The BOM confirmed that that there was no supervisor review of the health screen as required.</p> <p>B.</p> <p>Record review of the undated and untitled list of facility employees revealed that NA-F had a hire</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Screen for MA-D did not contain the supervisor signature and had no documentation that the health screen had been reviewed. The BOM confirmed that that there was no supervisor review of the health screen as required.</p> <p>F.</p> <p>Record review of the facility policy titled Hand Hygiene dated 2/4/25 revealed that all staff will perform proper hand hygiene (hand sanitization) to prevent the spread of infection to other personnel, residents, and visitors. This applies to all staff working in all locations within the facility. Staff will perform hand hygiene when indicated using proper technique consistent with accepted standards of practice. Hand hygiene is indicated and will be performed when entering and exiting a resident room, between resident contacts, and after handling contaminated objects.</p> <p>Observation on 6/9/25 at 12:27 PM at the facility dining room revealed that Dietary Aide (DA)-A pushed a 3 shelf cart containing 3 resident room meals down the west hall to the room of Resident 2. DA-A removed a covered plate from the 3 shelf cart and carried it into the room of Resident 2. DA-A used the bare hands to rearrange items on the over bed table next to Resident 2. Resident 2 was in the recliner and refused the meal. DA-A asked Resident 2 if they wanted the tea left in the room. DA-A picked up the plate of food and carried it out of the room and placed it back onto the 3 shelf cart. DA-A pushed the cart down the hall past 2 resident rooms and applied hand sanitizer from a dispenser in the hall. DA-A rubbed their hands together and then continued to push the 3 shelf cart to the room of Resident 16 on the east hall. DA-A picked up a covered plate and beverages from the cart and carried them into the room of Resident 16. DA-A used the bare left hand to move items on the over bed table to make room for the plate of food. DA-A sat the plate on the over bed table and encouraged Resident 16 to eat what they could. DA-A used the bare hands to reposition the over bed table over the lap of Resident 16. DA-A exited the room of Resident 16 and pushed the 3 shelf cart to the room of Resident 18. DA-A did not perform hand sanitization. DA-A picked up a covered plate of food from the 3 shelf cart and carried it into the room of Resident 18. The room was dark and DA-A asked Resident 18 if they wanted them to turn the light on. DA-A used the bare right hand to turn the light on. DA-A sat the plate of food on the edge of the over bed table. DA-A used the bare hands to pick up the podium mirror from the over bed table and sat the mirror on the floor by the room heating unit. DA-A used the bare hands to move other items on the over bed table and positioned the plate of food in the middle of the over bed table. DA-A repositioned the over bed table for Resident 18 to begin eating. DA-A exited the room of Resident 18 and pushed the 3 shelf cart to the facility dining room. DA-A did not perform hand sanitization. DA-A walked over to the kitchen meal service window and picked up a carafe of coffee with the bare right hand and moved it to a different location in the service window. DA-A entered the kitchen and walked past the sink. The facility Dining Supervisor was washing their hands at the sink. DA-A continued through the door towards the employee lounge. DA-A re-entered the kitchen through the door near the sink and stopped and began to wash the hands. DA-A washed the hands for a total of 11 seconds.</p> <p>Interview on 6/12/25 with the facility Infection Preventionist (IP) confirmed that staff are required to perform hand hygiene on exit from a resident room. IP confirmed that this includes dietary staff delivering meals into resident rooms.</p>		