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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 305064 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 04/23/2025 |
| NAME OF PROVIDER OR SUPPLIER Exeter Center | | STREET ADDRESS, CITY, STATE, ZIP CODE 8 Hampton Road Exeter, NH 03833 | |

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) |
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| <p>F 0641</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Some</p> | <p>Ensure each resident receives an accurate assessment.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Resident #54</p> <p>Review on 4/22/25 of Resident #54's Hospital Discharge summary, dated [DATE], revealed that Resident #54 had a Stage 2 pressure injury on the right heel.</p> <p>Review on 4/22/25 of Resident #54's admission note, dated 11/12/24, revealed that Resident #54 had a blister [Stage 2 pressure ulcer] on the right heel 4 cm (centimeter) x (by) 2 cm.</p> <p>Review on 4/22/25 of Resident #54's 5-day MDS assessment with an ARD of 11/15/24 revealed that in Section M0100 Determination of Pressure Ulcer/Injury Risk was not coded for resident having pressure ulcer/injury. Further review revealed that Section M0210 Unhealed Pressure Ulcers/Injuries was coded 0, indicating not having one or more unhealed pressure ulcer.</p> <p>Interview on 4/23/25 at 10:20 a.m. with Staff C (MDS Coordinator) confirmed that Resident #54 had a Stage 2 pressure that was present on admission and that the above MDS was coded incorrectly.</p> <p>Based on record review and interview, it was determined that the facility failed to correctly code section M0300(Pressure Ulcers) on 2 of 15 resident Minimum Data Set (MDS) assessments reviewed in a final sample of 15 residents (Resident Identifier #20 and #54).</p> <p>Findings include:</p> <p>Resident #20</p> <p>Review on 4/21/25 of Resident #20 admission note dated 3/26/25 revealed pressure area present on admission.</p> <p>Review on 4/21/25 of Resident #20's 5-day MDS with an Assessment Reference Date (ARD) of 3/30/25 revealed M0300 Current number of unhealed pressure B1 Number of stage 2 pressure ulcers was coded 1 and M0300 B2 Number of These Stage 2 pressure ulcers that were present on admission/entry or reentry was coded 0.</p> <p>Review on 4/22/25 of Resident #20's care plan revealed .actual pressure are [sic] on coccyx present upon admission .</p> <p>Interview on 4/22/25 at approximately 1:15 p.m. with Staff C (MDS Nurse) confirmed that Resident #2 has a Stage 2 pressure ulcer present on admission and the above MDS was coded incorrectly.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>Based on observation, interview, and record review, it was determined that the facility failed to ensure that open injectable medications were labeled in accordance with the manufacturer's instructions in 1 of 1 medication room observed.</p> <p>Findings Include:</p> <p>Observation on 4/21/25 at approximately 8:30 a.m. with Staff G (Licensed Practical Nurse) in the Chase Unit Medication Room revealed an open multi-dose vial of Tuberculin Purified Protein Derivative (Mantoux) without an open date or an open expiration date in the medication refrigerator.</p> <p>Interview on 4/21/25 at approximately 8:30 a.m. of Staff G confirmed the above findings.</p> <p>Review on 4/21/25 of the Tuberculin Purified Protein Derivative (Mantoux) manufacturer instructions revealed A vial .which has been entered and in use for 30 days should be discarded .</p> <p>Review on 4/21/25 of the facility policy titled Medications and Medication Labels dated 1/25 revealed PROCEDURES .2. Multi-dose vials shall be labeled to assure product integrity, considering the manufacturers' specifications .Nursing staff should document the date opened on multi-dose vials on the attached auxiliary label .</p> | | |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>Based on observation, interview and policy review, it was determined that the facility failed to ensure that food is stored in accordance with professional standards for food service safety for 1 out of 1 kitchen observed.</p> <p>Finding Include:</p> <p>Observation on 4/21/25 at approximately 8:20 a.m. in the kitchen with Staff A (Dietary Cook) revealed the following:</p> <p>A small dish of salad covered in plastic wrap without a preparation or use by date in the refrigerator; a clear container with tuna fish covered with plastic wrap, labeled tuna fish with a date of 4/14 (preparation date) in the refrigerator; a clear container with chicken salad covered in plastic wrap, labeled chicken salad with date of 4/13 (preparation date) in the refrigerator; a stainless steel bowl containing cubes of cooked potatoes uncovered without a preparation date; a plastic bag containing 7 thawed chicken breasts dated 4/15 (date pulled from the freezer) in the walk-in refrigerator; a case of cucumbers with 6 cucumbers that is leaking fluid, had black spots, and soft to touch in the walk-in refrigerator; a stainless steel pan containing thawed sliced deli ham dated 3/12 (date pulled from the freezer) in the walk-in refrigerator; and a stainless steel pan continuing thawed sliced salami dated 3/5 (date pulled from the freezer) in the walk-in refrigerator.</p> <p>Interview on 4/21/25 at approximately 8:30 a.m. with Staff A (Dietary Cook) confirmed the above findings.</p> <p>Review on 4/21/25 of the facility's policy titled Food Storage: Cold Foods, Revised 9/2017, revealed . Procedures 5. All foods will be stored wrapped or in covered containers, labeled and dated, and arranged in a manner to prevent cross contamination .</p> <p>Review on 4/21/25 of the facility's policy titled Food Storage and Retention Guide,with no date, revealed . Ready-To-Eat/Prepared Foods .(Examples: leftovers, deli salads, cut produce .Refrigerator .Up to 7 days Day 1 is the day of preparation .Raw Meat/Poultry/Seafood: Fish, seafood, ground meat, and all poultry . Refrigerator .(Once Thawed) .1-2 days .</p> <p>Interview on 4/22/25 at approximately 11:00 a.m. with Staff B (Dietary Manager) confirmed the above policies.</p> <p>Standard:</p> <p>(continued on next page)</p> | | |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Review on 4/23/25 of the U.S. Food and Drug Administration Food Code, dated 2017, retrieved from https://www.fda.gov/food/FDA-food-code/food-code-2017 revealed the following: .Chapter 3 Food .3-305.11 Food Storage .Food shall be protected from contamination by storing the Food: .On-premises preparation . (D) A date marking system that meets the criteria stated in (A) and (B) of this section may include: (1) Using a method approved by the regulatory authority for refrigerated, ready-to-eat time/temperature control for safety food that is frequently rewrapped, such as lunchmeat or a roast, or for which date marking is impractical . (3) Marking the date or day the original container is opened in a food establishment, with a procedure to discard the food on or before the last date or day by which the food must be consumed on the premises, sold, or discarded .; or (4) Using calendar dates, days of the week, color-coded marks, or other effective marking methods .Products which are damaged, spoiled, or otherwise unfit for sale or use in a food establishment may become mistaken for safe and wholesome products and/or cause contamination of other foods . (5) Certain foodborne pathogens that are anaerobes or facultative anaerobes are able to multiply under either aerobic or anaerobic conditions. Therefore special controls are necessary to control their growth. Refrigerated storage temperatures of 5&deg;C (41&deg;F) may be adequate to prevent growth and/or toxin production of some pathogenic microorganisms .</p> | | |