

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 676226	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/06/2020
NAME OF PROVIDER OF SUPPLIER CYPRESS HEALTHCARE AND REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP 1351 SADLER SAN MARCOS, TX 78666	
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 Level of harm - Minimal harm or potential for actual harm Residents Affected - Some	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on observation, interview, and record review, the facility failed to meet the standards of professional food safety in the facility kitchen as evidenced by: - Bags of food were not properly sealed and dated - Containers of food were left uncovered - Refrigerator temperatures were not documented. - Leaving unclean utensils hanging in the clean utensil area - Leaving undated and unlabeled food items in the pantry - Leaving clean utensils in drawers with crumbs and trash This failure could place residents who eat from the kitchen at risk for food borne illness. Findings: Observation on [DATE] at 1:11 PM of the kitchen revealed the following: --The temperature log dated [DATE] -[DATE] for three refrigerators and one freezer were blank. --The refrigerators contained the following open packages that were undated and unlabeled: grated cheese, tortillas, celery that was turning brown, oranges with mold on them, slices of cheese, tortillas with a manufacturer expired date, a plate of salad with no date or label, and a zipper closure bag with a piece of raw chicken with white slime. --A gallon jar of tartar sauce was almost empty and not dated. --A jar of bouillon base was open but not dated or labeled. --In the freezer there were the following open containers without labels or dates: pancakes, ice cream, cinnamon rolls, and shoepeg corn. --The pantry contained undated and unlabeled hamburger buns, and french fried onion rings. -- One red handled 8-ounce scoop with dried food stuck on the outside and inside the scoop hanging in the clean utensil area --Observations of drawers containing clean smaller utensils and pot holders had crumbs and bits of trash in the bottom of three drawers. In an interview on [DATE] at 1:11 PM, the DSM said all packages should be dated and labeled. She said she expects her staff to throw out any unlabeled and undated foods. She said temperatures of the freezer and refrigerators should be taken and documented daily. During an interview on [DATE] on 1:32 PM the Administrator said he expected the DSM to follow the kitchen policy and procedures, take charge of the kitchen. Review of undated kitchen policy and procedures reflected the following: Storage Freezer - page 70 #2 Keep all frozen foods tightly wrapped or packaged to prevent freezer burn. #3 Label and date all items. #5 Temperature of each freezer shall be recorded daily. Storage Refrigerator - page 71 #7 Keep refrigerated foods wrapped or covered in sanitary containers. #11 Temperature of each refrigerator shall be checked and recorded each day. Sanitation - page 62 #2 All utensils, counters, shelves, and equipment shall be kept clean .</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.