

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 06/05/2025
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 335537	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/23/2023
NAME OF PROVIDER OR SUPPLIER Rutland Nursing Home, Inc		STREET ADDRESS, CITY, STATE, ZIP CODE 585 Schenectady Ave Brooklyn, NY 11203	
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>42101</p> <p>Based on observation and interview conducted during the Recertification survey 10/16/2023 to 10/23/2023, the facility did not ensure that food was stored, prepared, distributed, and served in accordance with professional standards for food service safety to prevent foodborne illness. Specifically, 1) a dietary staff did not change contaminated gloves after disposing garbage and proceeding to handle soiled dishes which were scraped before cleaning for the tray line and no hand hygiene between changing gloves. This was observed during the Kitchen facility task.</p> <p>The findings are:</p> <p>The facility's policy and procedure dated 09/2023 titled Hand Hygiene, documented hand hygiene is the most effective method to prevent infections. Documented hand hygiene needs to be performed when moving from dirty to clean and before donning gloves.</p> <p>The dietary department employee meeting sign in sheet dated 8/4/2023 documented dietary aide received training that included hand hygiene.</p> <p>On 10/19/2023 at 03:51 PM - 4:26 PM, the Dietary Aide (DA) was observed transporting trash from the kitchen which was placed in a large gray bin and blue cloth cover placed on top. The Dietary aide was wearing gloves and cloth apron. The Dietary Aide opened the garbage disposal door and 10 bags placed in trash, to include some bags that had liquid food leaking on the bottom end that dripped on the ground outside of the compactor and trash placed in bin was compacted. The trash compactor was activated using the key provided by the Food Service Supervisor (FSS). The trash container rinsed out using water hose and transported back to the kitchen. DA brought back the trash bin back in kitchen and navigated the hallways of the hospital basement area back to the kitchen due to transport elevator not working. The DA touched multiple doors to include the back garbage compactor door and corridor door handles with gloved hands. DA returned to the kitchen with the trash bin and removed the cloth tarp cover taken off and placed the cover on tiered shelf in the kitchen by the wall in the dish room. The Dietary Aide then proceeded to place scraped trays on dish machine, no hand hygiene was done after handling trash. Dietary aide removed trays from rack placed them in the dish machine. The DA takes gloves off and puts on new pair of gloves, continued to take dishes off the dish machine and placing on the metal rack. The DA takes off gloves and puts on another pair of gloves wearing the same cloth apron from throwing out trash while retrieving dishes from dish machine. DA pulling off dishes from dish machine inspecting for cleanliness and their apron is touching left side of dish machine. On 10/19/2023 at 04:26 PM, the DA takes off the gloves and washes their hands.</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID: 335537	Facility ID: 335537 If continuation sheet Page 1 of 4

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 10/19/23 at 11:58 AM, an interview was conducted with Dietary Aide (DA) who stated that they were handling dirty trays why they did not change their gloves in the dish room. If they had to multitask, they will change gloves. They stated usually 1 person going to do garbage, sending trays, and catching trays. They wear a cloth apron when they take out the trash. If there are 2 persons, it is hard to stop, and trays are dirty and why it started to send them thru. Trays taken off go to the back to the tray line. They have had Inservice on hand washing in 2023. They stated that they are supposed to wash their hands for 30 seconds to prevent cross contamination and germs.</p> <p>On 10/19/2023 at 04:33 PM, an interview was conducted with the Food Service Supervisor (FSS) who stated that staff should wash hands and stated washed the trash compactor key after taking back from the DA. When gloves are takeoff gloves staff should do hand hygiene. There are plastic aprons and cloth aprons area available, and staff report the thick apron is too hot in the dish room. Staff should be wearing plastic apron so they should be protecting themselves. You don't want the dirty getting into the clean items. Staff should always wash hands after dumping trash. Proper clothing is another part of cross contamination wearing it and going to the clean side can cause cross contamination.</p> <p>On 10/19/2023 at 04:38 PM, an interview was conducted with the Director of Environmental Services/Food Service Director (FSD) who stated that they noticed the DA did not wash their after they got back to the dish room. Upon entering kitchen staff should wash hands and reapply gloves and staff have been in-serviced. DA should have changed gloves before handling trays. The apron should have been taken off or covered with a plastic apron to prevent cross contamination. Infection control and for safety of the resident at the end of the day. Prevention of cross contamination based on infection control</p> <p>On 10/23/2023 at 01:17 PM, an interview was conducted with the Infection Preventionist who stated that they have a hand washing program that the nurse manager monitors. Hand washing is very important, and COVID-19 taught us that, so we do not transmit disease from person to person. Once hands can transmit everywhere especially with food. They stated that hand washing is a big part of their surveillance.</p> <p>415.14(h)</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 42101</p> <p>Based on observation, record review, and staff interview conducted during the recertification survey 10/16/2023 to 10/23/2023 and complaint NY00315981, the facility did not maintain an effective pest control program so that the facility is free of pests and rodents. This was evident on 2 of 13 units. (8 [NAME] and 10 West). Specifically, a live mouse was observed crawling in a resident's room on 8 [NAME] and in the hallway near the nursing station on the 10th floor.</p> <p>The facility policy and procedure titled Pest Control revised 03/2023 documented the facility is to maintain an effective pest control program that eradicates and contains common household pests and rodents that include roaches, ants, mice, and rats.</p> <p>The finding is:</p> <p>1. On 10/18/2023 at 08:30 AM, while standing next to the nurses station on 10 [NAME] beside RN #3, a mouse was observed crawling from under the door of the staff lounge toward the documentation area located behind the nurses station. RN #3 present at the time of the mouse sighting stated they would call the exterminator.</p> <p>The Pest Control Log for the 10th floor was reviewed documented mice sightings in multiple rooms on 6/28/2023 (1008, 1010, 1011 and 1013) and in single rooms on 7/11/2023 (room [ROOM NUMBER]), 7/20/2023 (room [ROOM NUMBER]), 7/22/2023 Room (1014) and on 9/15/2023 (room [ROOM NUMBER]).</p> <p>2. On 10/18/2023 at 12:46 PM, on unit 8 West, in room [ROOM NUMBER], a live mouse approximately 3 to 4 inches was observed crawling from under the dresser to under the radiator area in the resident's room.</p> <p>On 10/19/2023 at 12:33 PM, Resident residing in room [ROOM NUMBER] was interviewed and stated they have seen mice walking in their room and they often go under the radiator.</p> <p>The Pest Control Log for the 8th floor was reviewed and documented two mice seen in room [ROOM NUMBER] running on wall and dresser on 6/29/2023 and multiple mice seen running in room [ROOM NUMBER] on 7/18/2023.</p> <p>On 10/23/2023 at 12:54 PM, the Assistant Director of Building Services (ADBS) was interviewed and stated they do not have an overwhelming number of pest cases and if it is overwhelming, they address. The ADBS also stated that they have an exterminator who works from 8AM- 4PM who is an outside contractor and they get occasional calls for mice. The ADBS further stated that this is the resident's home, the building is old, and there is a lot of hoarding of food.</p> <p>On 10/23/2023 at 01:20 PM, an interview was conducted with the Exterminating Technician (ET) who stated that they do pest management for the facility. The ET also stated that they do rounds daily and look into whatever complaint is made. The ET further stated that they apply traps and they have caught activity as many as 15-20 mice in the last month.</p> <p>(continued on next page)</p>		

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F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	On 10/23/2023 at 02:14 PM, the Administrator was interviewed and stated they do have the exterminator come in daily to go around and address any pest issues. The Administrator further stated that they are working with facility management to ensure everywhere is sealed. 10 NYCRR 415.(5)(h)(1)		