

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 150021	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 11/19/2012
NAME OF PROVIDER OR SUPPLIER PARKVIEW REGIONAL MEDICAL CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 11109 PARKVIEW PLAZA DRIVE FORT WAYNE, IN 46805		
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S0000	<p>This is a State hospital complaint investigation.</p> <p>Date of Survey: 11/19/2012</p> <p>Facility Number: 005020</p> <p>Complaint # IN00117891 Substantiated: State deficiency cited.</p> <p>Surveyor: Albert Daeger, Medical Surveyor</p> <p>QA: claughlin 12/04/12</p>	S0000			

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.

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S0610	<p>410 IAC 15-1.5-2 INFECTION CONTROL 410 IAC 15-1.5-2(f)(3)(D)(x)</p> <p>(f) The hospital shall establish an infection control committee to monitor and guide the infection control program in the facility as follows: (3) The infection control committee responsibilities shall include, but not be limited to, the following: (D) Reviewing and recommending changes in procedures, policies, and programs which are pertinent to infection control. These include, but are not limited to, the following:</p> <p>(x) A program of food preparation and storage for all personnel involved in food handling which includes, but is not limited to, the following:</p> <p>(AA) Storage of employee food in patient refrigerators.</p> <p>(BB) Medications in nutrition refrigerators.</p> <p>(CC) Refrigerator and freezer temperature monitoring.</p> <p>Based on on document review and observation, the facility failed to ensure hot and cold holding temperatures on the serving lines in the cafeteria are within the hot and cold holding ranges as defined in the hospital policies and procedures and 410 IAC 7-24-187, Retail Food</p>	S0610	<p>A. How are you going to correct the deficiency? If already corrected, include the steps taken and the date of correction. The hospital has an established Infection Control Committee that reviews the food preparation and storage for all personnel involved in food handling which includes refrigerator and freezer temperature monitoring policy</p>	12/07/2012			

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	<p>Establishment sanitation Requirements.</p> <p>Findings included:</p> <p>1. Parkview Health policy and procedure; Hot food and Cold food holding (last reviewed and updated March 2012) states, " Hot holding equipment must keep food temperature at 140 F or higher. Cold holding equipment must keep feed temperature at 40 F or lower. Check and Record temperature on HACCP Log Product temperature must be recorded on the HACCP Daily Log at two hour intervals during holding and serving. If product are held and served for less than two hours, product temperatures must be recorded at the beginning and end of service. " The daily log was reviewed for 11/19/2012; the HACCP daily log was not completed as of 2:00 PM.</p> <p>2. Retail Establishment Sanitation Requirements 410 IAC 7-110-187; Potentially Hazardous Food; Hot</p>		<p>and procedure that was previously approved in March 2012. The nutritional services staff were re-educated on HACCP Standards which include Thermometer Usage/Refrigerator and Freezer temperature monitoring. All staff is to strictly adhere to the policy and procedures and non-compliance will be forwarded to the Director of Nutritional Services. B. How are you going to prevent the deficiency from recurring in the future? The nutritional services supervisors will review the temperature logs daily for accurate completion. The weekly interdisciplinary rounds include observation of temperature logs to ensure compliance of completion and random temperature checks to confirm the temperature. C. Who is going to be responsible for steps "A" and "B" above? The Director of Nutritional Services has oversight and accountability. D. By what dates are you going to have the deficiency corrected? 12/7/2012.</p>		

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	<p>and Cold Holding states, "Potentially hazardous food shall be maintained as follows: (1) At one hundred thirty-five (135) degrees Fahrenheit or above; or at forty-one (41) degrees Fahrenheit or less."</p> <p>3. At 11:35 AM on 11/29/2012, the grill station serving line was observed storing diced turkey on it. The diced turkey ranged between 47 and 55 F. The temperature violations that were observed on the serving line were confirmed by staff member #1.</p> <p>4. At 1:25 PM on 11/19/2012, the Mexican/Taco Bar station were inspected in the cafeteria. The following items were tested Mexican Station steam table; Diced Tomatoes - 45 F; Shredded cheese - 45 F; and chicken breast - 121 F (the sauce the chicken breast was displayed in registered 145 F).</p> <p>5. At 1:45 PM on 11/19.2012, the self-serve salad bar was inspected.</p>			

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	The temperatures on the salad bar of the shredded cheese, diced ham, cubed cheese, and macaroni salad register 55, 50, 48, and 54 degrees respectively. The containers were observed stored in a salad bar containing ice as the coolant median; however, the ice was observed a couple of inches thick and in areas was not even touching the bottom of the containers. The ice was not properly displayed in the salad bar to maintain the temperature of the potentially hazardous food at 41 degrees F or below as required by 410 IAC 7-24.			