

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 151507	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 01/11/2012 12:00:C
NAME OF PROVIDER OR SUPPLIER ST VINCENT HOSPICE			STREET ADDRESS, CITY, STATE, ZIP CODE 8450 N PAYNE RD STE 100 INDIANAPOLIS, IN46268		
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S0000	<p>This was the 2012 ISDH Annual Compliance Survey based on the Retail Food Establishment Sanitation Requirements at 410 IAC 7-24.</p> <p>Facility Number: 005124</p> <p>Survey Dates: 1/11/2012</p> <p>Surveyors: Albert Daeger, CFM, SFPIO Medical Surveyor</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN January 13, 2012</p>	S0000			
S9999	<p>Please see the Retail Food Establishment Inspection Report-Electronic included with this document for deficiencies related to 410 IAC 7-24.</p>	S9999	<p>Deficiency 187: At 10:45AM, assorted sandwiches, yogurt, creamcheeses, cut melons were observed between 48 and 52 degrees F while being stored in the stand-up refrigerator. Staff documentation revealed the food was received from the St Vincent Hospital at 7:00 AM at 34 degrees F. Code/Section 187- Assorted sandwiches, yogurt,</p>	01/31/2012	

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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			cream cheeses and cut melons were discarded from the refrigerator by the Food Services Associate at the direction of the surveyor while he was on site. Corrected 1/11/2012 at 10:45am. Deficiency 187: The stand-up refrigerator in the kitchen was observed maintaining the cold food at 48 degrees plus. Code/Section 187- The temperature was increased in the refrigerator by the Facilities Associate to bring the temperature down to 41 degrees or less immediately on 1/11/2012 at 11:00. Daily temp checks of the refrigerator conducted by the Quality Manager for one week post survey revealed no temps above 40 degrees. The temperature continues to be monitored daily and is recorded. Deficiency 254: The person-in-charge was using an infrared thermometer to test internal food temperatures with. An infrared thermometer can be plus 4 degrees off from actual internal food temperature. A test was conducted with a sandwich. The staff tested the sandwich at 54 degrees F with the infrared thermometer while this inspector tested the sandwich to be 48 degrees F with a thermal coupler. Code/Section 254- The infrared thermometer was replaced with a digital spike thermometer enabling temperature assessment of the internal temperature of		

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			<p>edibles, not just a surface temp. Delivery of the new thermometer was arranged by the Manager of Food Services. The infrared thermometer is no longer in use. The new thermometer arrived with replacement food for the Hospice on 1/11/2012 at 12:30pm. Deficiency 269: Staff uses the family center's dishwasher to wash their utensils because the kitchen does not have a 3-compartment sink and/or dishwasher as required for all kitchen units. Code/Section 269 - On 1/31/2012 a stainless steel 3 compartment sink was installed in the food handling area of St Vincent Hospice. This sink will be used to discard liquids and wash food serving utensils. Therefore, the hand washing sink, which is separate from the 3-compartment sink, will be used only for hand hygiene purposes. Food Service Associates were educated that the family center's dishwasher was not to be used for any patient items from the kitchen, no soiled utensils could be left soaking in the red sanitizing bucket, and that the hand washing sink could not be used for anything other than hand washing. This education was completed by the Quality Manager on 1/11/2012. Deficiency 345: During the tour of the kitchen, the hand sink was observed with a strainer in it preventing proper hand washing. The person-in-charge indicated</p>		

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			<p>the strainer was to drain liquid waste so the food debris could be thrown away. The hand sink was also being used as an utility sink.Code/Section 345 - On 1/31/2012 a stainless steel 3 compartment sink was installed in the food handling area of St Vincent Hospice. This sink will be used to discard liquids and wash food serving utensils. Therefore, the hand washing sink, which is separate from the 3-compartment sink, will be used only for hand hygiene purposes. Food Service Associates were educated that the family center's dishwasher was not to be used for any patient items from the kitchen, no soiled utensils could be left soaking in the red sanitizing bucket, and that the hand washing sink could not be used for anything other than hand washing. This education was completed by the Quality Manager on 1/11/2012.Deficiency 355: The staff in the kitchen uses the hand sink to dispose liquid waste because the kitchen does not have an utility sink as required.Code/Section 355 - On 1/31/2012 a stainless steel 3 compartment sink was installed in the food handling area of St Vincent Hospice. This sink will be used to discard liquids and wash food serving utensils. Therefore, the hand washing sink, which is separate from the 3-compartment sink, will be used only for hand hygiene purposes.</p>		

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

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FORM APPROVED

OMB NO. 0938-0391

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			Food Service Associates were educated that the family center's dishwasher was not to be used for any patient items from the kitchen, no soiled utensils could be left soaking in the red sanitizing bucket, and that the hand washing sink could not be used for anything other than hand washing. This education was completed by the Quality Manager on 1/11/2012.		