

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 151503		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 02/21/2013	
NAME OF PROVIDER OR SUPPLIER VISITING NURSE & HOSPICE HOME				STREET ADDRESS, CITY, STATE, ZIP CODE 5910 HOMESTEAD RD FORT WAYNE, IN 46814			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE			
S0000	<p>This was the 2013 ISDH Annual Compliance Survey based on the Retail Food Establishment Sanitation Requirements at 410 IAC 7-24.</p> <p>Facility Number: 005120</p> <p>Survey Dates: 2/21/2013</p> <p>Surveyors: Albert Daeger, CFM, SFPIO Medical Surveyor</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN February 25, 2013</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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S9999	Please see the Retail Food Establishment Inspection Report-Electronic included with this document for deficiencies related to 410 IAC 7-24.	S9999	Plan of Correction for 129. Patient Care Coordinator of Hospice Home developed a self-study inservice for staff and volunteers involved in food preparation with a quiz, which is required to be completed by 3/20/2013. Inservice includes instructions on hand washing, cross-contamination prevention, and hair restraints. Vice President of Clinical Services made revisions to Policy 307, Food Preparation, and to the inservice, Food Safety and Sanitation, to include hand washing and use of gloves during the food preparation process. The Food Safety and Sanitation Inservice and post test is completed by staff and volunteers involved in food preparation during orientation and annually, thereafter. Inservice and post test tracking completed by the Education department. The Patient Care Coordinator of Hospice Home will be responsible to monitor these corrective actions monthly, to ensure deficiencies are corrected and will not recur. Plan of Correction for 173. Patient Care Coordinator notified staff and volunteers involved in food preparation that visitors cannot bring in crockpots and place in food preparation areas. This notice was effective immediately, 2/21/2013. Patient Care Coordinator of Hospice	03/20/2013

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			<p>Home developed a self-study inservice for staff and volunteers involved in food preparation with a quiz, which is required to be completed by 3/20/2013. Inservice includes instructions on hand washing, cross-contamination prevention, and hair restraints. Vice President of Clinical Services made revisions to Policy 307, Food Preparation, and to the inservice, Food Safety and Sanitation, to include measures to prevent cross contamination in the patient food preparation area. The Food Safety and Sanitation Inservice and post test is completed by staff and volunteers involved in food preparation during orientation and annually, thereafter. Inservice and post test tracking completed by the Education department. The Patient Care Coordinator of Hospice Home will be responsible to monitor these corrective actions monthly, to ensure deficiencies are corrected and will not recur. Plan of Correction for 119. Patient Care Coordinator of Hospice Home ordered new sign which will be placed on stand in front of the food preparation area to notify visitors and non-food preparation staff when kitchen is closed for patient food preparation. Current sign remains on kitchen counter and will be replaced with larger sign. Delivery date of new sign is 3/7/2013. Patient</p>	

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			Care Coordinator of Hospice Home consulted with Registered Dietician on 2/26/2013 regarding required processes to prevent cross contamination in food preparation area. Vice President of Clinical Services made revisions to Policy 307, Food Preparation, and to the inservice Food Safety and Sanitation, to include cross contamination measures recommended by Registered Dietician. Patient Care Coordinator of Hospice Home has updated the Food Policy Book which is kept in the kitchen area for food preparation staff and volunteers. The Patient Care Coordinator of Hospice Home will be responsible to monitor these corrective actions monthly, to ensure deficiencies are corrected and will not recur. Plan of Correction for 138. Patient Care Coordinator ordered hair nets to cover hair of staff and volunteers while involved in food preparation and notified these individuals of required use of hair restraints on 2/26/2013. Patient Care Coordinator of Hospice Home developed a self-study inservice for staff and volunteers involved in food preparation with a quiz, which is required to be completed by 3/20/2013. Inservice includes instructions on use of hair restraints. Vice President of Clinical Services made revisions to Policy 307, Food Preparation, and to the	

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			inservice, Food Safety and Sanitation, to include use of hair restraint during the food preparation process. The Food Safety and Sanitation Inservice and post test is completed by staff and volunteers involved in food preparation during orientation and annually, thereafter. Inservice and post test tracking completed by the Education department. The Patient Care Coordinator of Hospice Home will be responsible to monitor these corrective actions monthly, to ensure deficiencies are corrected and will not recur.	