

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  151500	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED  04/07/2014
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NAME OF PROVIDER OR SUPPLIER  HOSPICE OF THE CALUMET AREA INC	STREET ADDRESS, CITY, STATE, ZIP CODE 600 SUPERIOR AVE MUNSTER, IN 46321
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S000000	<p>This was the 2014 ISDH Annual Compliance Survey based on the Retail Food Establishment Sanitation Requirements at 410 IAC 7-24.</p> <p>Facility Number: 005787</p> <p>Survey Dates: 4/7/2014</p> <p>Surveyors: Albert Daeger, CFM, SFPIO Medical Surveyor</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN April 8, 2014</p>	S000000		

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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S009999	Please see the Retail Food Establishment Inspection Report-Electronic included with this document for deficiencies related to 410 IAC 7-24.	S009999	<p><u>Plan of Correction for Code Section 443</u></p> <p>After the survey, the Volunteer Coordinator re-educated the WJR Residence volunteers and staff who were on duty on the correct preparation and testing of the chlorine bleach solution. A new bottle of chlorine bleach solution was prepared with the correct concentration of 100-200 PPM. Completion Date: 4-7-2014</p> <p>The Volunteer Coordinator consulted with Hospice of the Calumet Area's Registered Dietician regarding the survey and the plan of correction. The Volunteer Coordinator also provided re-education to another group of volunteers and staff who were present at the WJR. Completion Date: 4-8-2014</p> <p>The Volunteer Coordinator mailed a letter to all WJR volunteers to review the procedure for preparing and testing the chlorine bleach solution used to sanitize food contact surfaces. The letter was also posted in the kitchen and staff room for RN and HA re-education. Completion Date: 4-15-2014 The survey report results and re-education for staff will be provided at the April 17th Hospice Aide</p>	04/15/2014	

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			<p>Meeting and the April 24th Nurse Meeting. Completion Date: 4-24-2014</p> <p>The Volunteer Coordinator will conduct onsite inspections three times a week for four weeks to ensure volunteer and staff compliance with preparing and testing the chlorine bleach solution. Completion Date: 5-3-2014</p> <p>If no compliance issues after 4 weeks, the Volunteer Coordinator will do random monthly inspections. Completion Date: Ongoing</p> <p>As noted above, the Volunteer Coordinator is responsible for the action steps. The PI Coordinator is responsible for the overall correction and ensuring the deficiency will not reoccur.</p> <p><u>Plan of Correction for Code Section 138</u></p> <p>After the survey, the Volunteer Coordinator re-educated the WJR volunteers and staff who were on duty on the mandatory use of a hair restraint when entering the kitchen. Completion Date: 4-7-2014</p> <p>The Volunteer Coordinator consulted with Hospice of the Calumet Area's Registered Dietician</p>		

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			<p>regarding the survey and the plan of correction. The Volunteer Coordinator also provided re-education to another group of volunteers and staff who were present at the WJR. Completion Date: 4-8-2014</p> <p>The Volunteer Coordinator ordered a second hair restraint dispenser for inside the kitchen door off the dining room to facilitate compliance and serve as a visual prompt. Completion Date: 4-14-2014</p> <p>The Volunteer Coordinator mailed a letter to all WJR volunteers to re-educate on mandatory hair restraint use in the kitchen. The letter was also posted in the kitchen and staff room for RN and HA re-education. Completion Date: 4-15-2014 The survey report results and re-education for staff will be provided at the April 17th Hospice Aide Meeting and the April 24th Nurse Meeting. Completion Date: 4-24-2014</p> <p>The Volunteer Coordinator will conduct onsite inspections three times a week for four weeks to ensure volunteer and staff compliance with wearing hair restrains in the kitchen. Completion Date: 5-3-2014</p> <p>If no compliance issues after 4 weeks, the Volunteer Coordinator will do random monthly</p>		

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			<p>inspections. Completion Date: Ongoing</p> <p>As noted above, the Volunteer Coordinator is responsible for the action steps. The PI Coordinator is responsible for the overall correction and ensuring the deficiency will not reoccur.</p> <p><u>Plan of Correction for Code Section 422</u></p> <p>After the survey, the Volunteer Coordinator re-educated the WJR staff not to store their purses or other personal items in the kitchen. Completion Date: 4-7-2014</p> <p>The Volunteer Coordinator consulted with Hospice of the Calumet Area's Registered Dietician regarding the survey and the plan of correction. The Volunteer Coordinator also provided re-education to another group of volunteers and staff who were present at the WJR. Volunteers were instructed to store their personal items such as purses in a designated location in the staff room. Completion Date: 4-8-2014</p> <p>The Volunteer Coordinator mailed a letter to all WJR volunteers to re-educate on not storing personal items such as purses in the kitchen. Personal items pose a possible contamination concern to kitchen items. The letter was also posted in</p>	

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			<p>the kitchen and staff room for RN and HA re-education. Completion Date: 4-15-2014 The survey report results and re-education for staff will be provided at the April 17th Hospice Aide Meeting and the April 24th Nurse Meeting. Completion Date: 4-24-2014</p> <p>Volunteer Coordinator will conduct onsite inspections three times a week for four weeks to ensure volunteer and staff compliance with not storing any personal items in the kitchen. Completion Date: 5-3-2014</p> <p>If no compliance issues after 4 weeks, the Volunteer Coordinator will do random monthly inspections. Completion Date: Ongoing</p> <p>As noted above, the Volunteer Coordinator is responsible for the action steps. The PI Coordinator is responsible for the overall correction and ensuring the deficiency will not reoccur.</p>	