

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155689	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 05/30/2012
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NAME OF PROVIDER OR SUPPLIER COURTYARD HEALTHCARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 2400 COLLEGE AVE GOSHEN, IN 46526
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F0000	<p>This visit was for the Investigation of Complaint IN00108369.</p> <p>Complaint IN00108369- Substantiated, Federal/State deficiencies related to the allegations are cited at F 364.</p> <p>Survey date: May 29, 30, 2012</p> <p>Facility number: 000091 Provider number: 155689 AIM number: 100290080</p> <p>Survey team: Carol Miller, RN, TC Shelly Vice, RN</p> <p>Census bed type: SNF/NF: 128 NF: 27 Total: 155</p> <p>Census payor type: Medicare: 20 Medicaid: 104 Other: 31 Total: 155</p> <p>Sample: 3</p> <p>These deficiencies reflect State findings cited in accordance with 410 IAC 16.2.</p>	F0000	<p>Please accept this Plan of Correction as our facility's Credible Allegation of Compliance for the Complaint Survey conducted 5/30/2012. Preparation of this Plan of Correction does not constitute admission or agreement of any kind by the facility of the truth of any facts alleged or the correction of the conclusion set forth in this allegation by the survey agency. The facility has prepared and submitted this Plan of Correction solely because of the requirements under State and Federal law the mandates submission of the Plan of Correction as a Condition to Participate in the Title 18 and Title 19 Programs.</p>	

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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	Quality review completed on June 4, 2012 by Bev Faulkner, RN			

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F0364 SS=E	<p>483.35(d)(1)-(2) NUTRITIVE VALUE/APPEAR, PALATABLE/PREFER TEMP</p> <p>Each resident receives and the facility provides food prepared by methods that conserve nutritive value, flavor, and appearance; and food that is palatable, attractive, and at the proper temperature.</p> <p>Based on interviews and observations, the facility failed to ensure residents were served meals at the designated meal times and the food was palatable and of proper temperature for 1 of 2 meals observed affecting 123 of 155 residents.</p> <p>Findings include:</p> <p>On 5/29/12 at 1:00 p.m., an interview with the Certified Dietary Manager (CDM) was conducted in regard to the evening meal. The CDM indicated tonight's meal was, "...Tuscany Turkey is the main course..." The CDM also indicated the item had been served before as a main course to the residents and the "pesto on the bread comes across as looking like mold." She indicated that the last offering of this main course was not well received by the residents.</p> <p>On 5/29/12 at 4:45 p.m., in an interview with the CDM in regard to hot food items being cold at times, the CDM indicated a plate warmer is used to warm the plates and "hot bottoms" are used at every meal</p>	F0364	<p>F364 NUTRITIVE VALUE/APPEAR, PALATABLE/PREFER TEMP</p> <p>Facility will continue to ensure that each resident receives and the facility provides food prepared by methods that conserve nutritive value, flavor, appearance, and food that is palatable, attractive, and at the proper temperatures. Corrective Actions: Tuscany Turkey has been removed from the menu cycle. How Others Identified: All residents who receive meals from the kitchen have the potential to be affected by this alleged deficient practice. Preventative Measures: Facility management, dietary and nursing staff have been trained on meal times, meal service procedures, and expectations. Monitoring: Facility has implemented forms which track when the first and last meals are served out of the kitchen. In addition, test trays are now being sent to the units along with the room tray carts. The tracking of first and last meal service times and test tray temperatures will be completed for 10 meals/week for the next month and 5 meals/week for the</p>	06/11/2012

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	<p>and the lids are used when the meals are sent to the units on the food carts.</p> <p>On 5/29/12 at 5:00 p.m., an interview was conducted with the Administrator. It was noted that the dinner hour of serving the residents was at 5:00 p.m.</p> <p>On 5/29/12 at 5:00 p.m. until 6:26 p.m., an observation was made at the dinner hour in the main dining room. The first tray to be served was delivered from the kitchen to a resident at 5:15 p.m. At 5:55 p.m., 9 tables of residents to be served dinner trays were awaiting to be served. At 6:10 p.m., the last table of residents were served their dinner trays.</p> <p>On 5/29/12 at 6:20 p.m., an interview was conducted with the Director of Nursing Services (DNS). The DNS indicated the tray delivery was not on time due to many special orders due to a new menu item being served and residents not liking the new menu item. The DNS stated "...this (food item) will not be on the menu again..."</p> <p>On 5/29/12 at 6:25 p.m., an observation of the meal cart was delivered to the Birch unit. At 6:30 p.m., all trays for the Birch until had been delivered.</p> <p>On 5/30/12 at 9:40 a.m., an interview</p>		<p>following five months with results of the tracking forwarded to the Performance Improvement Committee for review and follow-up. Date of Completion: June 11, 2012</p>				

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	<p>with Resident U was conducted in regards to the untimeliness of meal delivery. The resident indicated she, "ate in her room" and it," bothered her that the meals came as late as 6:40 p.m.... always cold... it's better now since I have a microwave in my room..." She indicated a change of preference with her main course at last night's dinner and noted, "...had a hot dog... and it came cold..." She proceeded to indicate she reheated the item in her microwave.</p> <p>On 5/30/12 at 9:45 a.m., an interview was conducted with Resident O in regard to the untimeliness of meal delivery. The resident indicated he ate in the, "Main dining room..." and received his dinner as late as 5:45 p.m. He indicated that, "... a lot of times the food delivered was cold... the meat comes cold, but the other food comes warm..." He indicated a change for the worse had occurred over the past 2 years.</p> <p>On 5/30/12 at 11:15 a.m., a confidential family interview (#1) was conducted on the promptness of the meal delivery. It was indicated that the supper meal was "always late... usually at least 45 minutes..." She did indicate that this was a concern to her.</p> <p>On 5/30/12 at 11:20 a.m., an interview</p>						

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	<p>was conducted with Resident X. She indicated that she usually ate in the main dining room and that, "...the meals are usually always late, supper is always late...but, I've gotten used to expecting that... I get the sandwiches a lot, because they (the facility) serve that a lot, but I don't like to do that any more because the bread always comes soggy...."</p> <p>On 5/30/12 at 11:21 a.m., an interview was conducted with Resident BB. She indicated that the meal delivery of trays was always late.</p> <p>On 5/30/12 at 11:22 a.m., an interview was conducted with Resident Z. She indicated that the supper, "...is always late... always..."</p> <p>On 5/30/12 at 11:30 a.m., another confidential family interview (#2) was conducted in regards to the promptness of meal delivery times. It was noted that upon first admission to the facility, the meal delivery time was always late and that this was bothersome to the resident's family. They since have, "grown accustom to the way things are here..." and indicate they are aware, "...how busy everyone is..."</p> <p>On 5/30/12 at 11:40 a.m., another confidential family interview (#3) was</p>			

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	<p>conducted in regards to the promptness of meal delivery times. It was noted, "... this is the first time (resident's name) has been to the main dining room for his meal... I was calling from my work at noon to order his meal tray for his evening meals, and finding when I would come in to feed him that the meal tray was not arriving until at least 7 p.m.... I made an effort to call ahead, and it still wasn't ready... one time I called in, placed his order and when I came into feed him that evening, the kitchen hadn't even received his meal tray order... so, that is why he is now coming down instead of eating in his room... 7 p.m. is too late for him to be offered supper..."</p> <p>On 5/30/12 at 1:50 p.m., an interview with the Certified Dietary Manager (CDM) indicated that the meal delivery from 5/29 p.m., took longer because there were "special orders" to be made at the last minute because the residents didn't like the main course that was offered. She indicated that there had been no complaints for cold food from the residents and "...in the past, family members have come.." to her and let her know of the concerns to which none had been made recently to her knowledge.</p> <p>On 5/30 12 at 1:51 p.m., an interview with the Administrator was conducted. It</p>			

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	<p>was indicated that, "...last night's supper was not a good meal..." The administrator indicated that the meal delivery time was delayed last evening due to the menu selection not being a good selection for the residents.</p> <p>This Federal tag relates to Complaint IN00108369</p> <p>3.1-21(a)(2)</p>				