

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING	X3) DATE SURVEY COMPLETED 11/26/2013
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NAME OF PROVIDER OR SUPPLIER ELMCROFT OF MUNCIE	STREET ADDRESS, CITY, STATE, ZIP CODE 1601 N MORRISON RD MUNCIE, IN 47304
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(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
R000000	<p>This visit was for a State Licensure Survey.</p> <p>Survey Dates: November 25 and 26, 2013.</p> <p>Facility Number: 010886 Provider Number: 010886 AIM Number: N/A</p> <p>Survey Team: Tina Smith-Staats, RN-TC Ginger McNamee, RN Angela Selleck, RN (November 25, 2013)</p> <p>Census Bed Type: Residential: 79 Total: 79</p> <p>Census Payor Type: Medicaid: 0 Other: 79 Total: 0</p> <p>Sample: 9</p> <p>This State finding is in accordance with 410 IAC 16.2.</p>	R000000		

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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R000273	<p>410 IAC 16.2-5-5.1(f) Food and Nutritional Services - Deficiency (f) All food preparation and serving areas (excluding areas in residents ' units) are maintained in accordance with state and local sanitation and safe food handling standards, including 410 IAC 7-24.</p> <p>Based on observation and interview, the facility failed to ensure refrigerated items were covered to prevent contamination for 2 of 3 kitchen observations in 1 of 2 kitchens observed. (Heartland Village kitchen) This deficient practice had the potential to effect 36 of 36 residents residing in the Heartland Village.</p> <p>Findings include:</p> <p>An observation of the kitchen of the Heartland Village was made on 11/25/13 at 10:30 a.m. There were 16 bowls of cottage cheese, 13 glasses of milk, 3 glasses of orange juice, a glass of prune juice, and 8 glasses of orange drinks uncovered in the refrigerator. The wire shelves above the cottage cheese and drinks had the finish worn off and were rusty in areas. Cook #1 indicated she had set up the cottage cheese and drinks in preparation for the noon meal. She indicated the items should have been covered.</p>	R000273	<p>The filing of this plan of correction is complete as evidenced by the communities desire to comply with Indiana regulatory requirements and to continue providing quality of care to our residents. This Plan of Correction serves as our allegation of substantial compliance. To assure regulatory compliance the community has taken the following measures:R23 410 IAC 16.2-5-5.1 (f) Food and Nutritional Services Deficiency It is the policy of Elmcroft of Muncie to maintain food prep and serving areas in accordance with state and local sanitation safe food handling standards: Each Dietary staff member present during day two of the survey was immediately in-serviced on safe food handling and covering all refrigerated items at all times. Remainder of dietary staff was in-serviced by Dietary Service Manager on safe food handling and covering all refrigerated item at all times on 11/29/2013. Dietary Service Manager and/or Designee to monitor daily for compliance. Health Facility Administrator to continue spot checking for compliance.</p>	11/29/2013			

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	<p>The kitchen in Heartland Village was observed on 11/26/13 at 10:35 a.m. There was an uncovered tray containing over 16 glasses water and an uncovered tray with 13 bowls of fruit on it. The bowls of fruit were sitting underneath the rusty wire shelves. Cook #2 indicated she had set up the trays for the lunch service at noon. She indicated food placed in the refrigerator needed to be covered.</p> <p>During an interview with the Administrator on 11/26/13 at 2:30 p.m., no additional information was provided related to the covering of food in the refrigerator.</p>		Completion Date: 11/29/2013				