

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 04/02/2014
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NAME OF PROVIDER OR SUPPLIER HEARTHSTONE HEALTH CAMPUS	STREET ADDRESS, CITY, STATE, ZIP CODE 3043 NORTH LINTEL DRIVE BLOOMINGTON, IN 47404
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F000000	<p>This visit was for a Initial Certification and State Licensure Survey.</p> <p>Survey Dates: March 31 and April 1 & 2, 2014</p> <p>Facility number: 012974 Provider number: pending AIM number: pending</p> <p>Survey team: Diana McDonald, RN-TC Melissa Gillis, RN Cheryl Mabry, RN Angela Patterson, RN</p> <p>Census bed type: SNF: 3 Residential: 23 Total: 26</p> <p>Census payor type: Other: 26 Total: 26</p> <p>Sample: 3 Residential sample: 5</p> <p>These deficiencies reflect state findings cited in accordance with 410 IAC 16.2.</p> <p>Quality review completed on April 10, 2014; by Kimberly Perigo, RN.</p>	F000000	<p>The submission of this plan of correctgion does not indicate an admission by Hearthstone Health Campus that the findings and allegations contained herein are an accurate and true representation of the quality of care provided to the residents of Hearthstone Health Campus. This facility recognizes it's obligation to provide legally and medically necessary care and service to its residents in an economic and efficient manner. The facility herby maintains it is in substantial compliance with the requirements of participation for residential health care facilities. To this end, this plan of correction shall serve as the credible allegation of complaince with all state and federal requirements governing the management of this facility. It is thus submitted as a matter of statue only. The facility respectfully request from the Department a desk review for paper compliance.</p>	
F000371 SS=F	<p>483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY The facility must -</p>			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiencystatement 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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	<p>(1) Procure food from sources approved or considered satisfactory by Federal, State or local authorities; and</p> <p>(2) Store, prepare, distribute and serve food under sanitary conditions</p> <p>Based on observation, interview, and record review, the facility failed to ensure food was discarded from 1 out 1 dry storage room, 1 of 1 walk in refrigerator, and 1 out 1 walk in freezer when the expiration date had passed, the covering of hair while working in the kitchen, and infection control practices were followed in the kitchen by facility staff as indicated by facility policy. This deficient practice had the potential to affect 3 out of 3 residents being served out of the kitchen. (DA #1 (Dietary Aide), Dietary Manager (DM), Administrator).</p> <p>Findings include:</p> <p>1). A. On 3/31/14 at 10:40 a.m., with the FSD (Food Service Director) present observation of the walk in refrigerator indicated the following:</p> <p>Green leafy vegetable [FSD indicated lettuce]. No identifiable label was observed.</p> <p>Potatoes slices in a plastic bag, which were brownish in color with brownish color water inside the baggie. The FSD removed the baggie at that time.</p> <p>A green leafy vegetable in a plastic bag [FSD indicated spinach]. No identifiable label was observed on the bag.</p> <p>An opened cole slaw, no documented open</p>	F000371	<p>The residents suffered no ill effects from the alleged deficiencies. All food products not dated or expired were disposed of immediately. Dietary staff were in-serviced on hair restraints and hand washing/glove use. Completion Date: 3-31-2014 All residents have the potential to be affected by the alleged deficient practice and through alterations in processes and in-servicing the facility will ensure the campus procures food from sources approved or considered satisfactory by Federal, State and/or local authorities and stores, prepares, distributes and serves food under sanitary conditions. Completion Date: 4-18-14 All dietary employees have been in-serviced on Storage Procedures for dry food, refrigerated food, leftover food storage, food labeling. In-services with dietary staff also completed for hair restraints and guidelines for hand washing/glove use. Systemic changes are as follows- all food items (dry, refrigerated, and frozen) will be stored in their original containers. Once opened, the item will be resealed in original container or placed into an appropriate storage container and covered.</p>	04/18/2014			

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	<p>date.</p> <p>Carrots wrapped in plastic, no open date was observed on the wrapping</p> <p>Strawberries in a container with a expiration date of 3/30/14.</p> <p>Three individually wrapped slices of leftover meatloaf was observed not to have a cooked date.</p> <p>Plate of pork and figs with a freeze by date of 3/20/14. The FSD indicated, "Oh it's expired, because the freeze by date is 3/20/14."</p> <p>An opened raisin bread with no documented open date. The FSD indicated, "Oh that came in on Friday." Observed the FSD to remove the raisin bread at that time.</p> <p>An open bag of Brie without an expiration date.</p> <p>A tub of Ricotta cheese dated 3/14/14.</p> <p>Vegetable base no open nor expiration date. The FSD was observed to remove and discard the out of date items at that time.</p> <p>Five opened tubs of horse relish. Four with an open date of 2/14/14 and no expiration date. One with no documented open date. The FSD indicated, "We keep for 30 days. I will throw them out."</p> <p>Observed an odor in the refrigerator and observed raw hamburger patties uncovered on a tray in the refrigerator and cooked chicken tenders uncovered on pan in the refrigerator. When asked what is that odor?</p>		<p>All food items will be identified, labeled, dated when opened. If appropriate the item will have the written expiration date. The campus will post Refrigerator and Storage Chart for reference on expiration/use thru date. The day and night shift cook will be required to complete a walk thru of the cooler, freezer and dry storage prior to leaving for the day to assure all food is stored per guidelines and expired food discarded. Kitchen staff will wear a hairnet under the cap if there is hair hangin loose. All kitchen employees will complete a competency check off for hand washing and glove usage now and annually thereafter. Completion Date 4-18-2014 ED/Designee will complete unannounced audit of kitchen for storage of food, proper hair restraints and hand washing/glove use 5 x's a week for a month then 3 x's a week for a month then 1 x weekly for 4 months. These audits will be conducted during a meal service either breakfast, lunch or dinner randomly throughout the week to include weekends. The results forwarded to QA committee monthly x's 6 months and quarterly thereafter for review and further suggestions/comments. Completion Date 4-18-2014</p>				

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	<p>The FSD indicated, "Oh that's the cooked chicken tenders that we have in here to cool down."</p> <p>B. On 3/31/14 at 10:55 a.m., observation of the dry storage room indicated the following:</p> <p>An open pack of citrus gel [gelatin mix] with no documented open date.</p> <p>An open baggie of graham cracker crumbs with no documented open date nor expiration date.</p> <p>A box of ice coffee with no documented open date and no expiration date.</p> <p>An opened box of crisp rice cereal with no documented open date nor expiration date.</p> <p>An opened bag of fudge brownie mix with no documented open date nor expiration date. The FSD indicated, "I'll throw them out, it's open then it's not good. I don't want to guess."</p> <p>C. On 3/31/14 at 11:10 a.m., observation of the walk in freezer indicated the following:</p> <p>Two packs of super sweet corn with no documented open date and no expiration date. One pack had plastic wrap hanging and not secure on package.</p> <p>One bag of broccoli florets with no documented open date.</p> <p>On 3/31/14 at 2:36 p.m., received "Storage Procedures" dated 2009, from the ADM (administrator) and indicated that was the current policy used by the facility. The policy indicated, "... DRY STORAGE OF FOOD ...</p>			

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	<p>6. Open packages are labeled, dated, and stored in closed containers. ... REFRIGERATED STORAGE ... 5. Food is covered, dated and stored loosely to permit air circulation. ...7. Prepared perishables such as salads, puddings, milk, etc., are stored in a refrigerator and covered, labeled, and dated until used. ...9. Food items are arranged so that older items will be used first. 10. Leftovers are refrigerated immediately and used within 72 hours or frozen."</p> <p>On 3/31/14 at 2:36 p.m., received "Food Labeling Guideline" dated 4/2013, from the ADM (administrator) and indicated that was the current policy used by the facility. The policy indicated, "...Date Marking Best Practice, ... To monitor and limit refrigeration time, refrigerated ready-to-eat (RTE) potentially hazardous food must be date marked to assure that the food is either consumed or discarded within seven days. Date marking must be done when food is: ... Refrigerated; and held more than 24 hours. Date marking of food prepared in the food establishment: ... foods must be marked with the date of preparation, and must be consumed or discarded within seven days including the day of preparation. ... Manufactures use by date or expiration date supersedes our date mark best practice. Prepared Leftover food items must be discarded within 3 days- please see below the Safe Food Cooking [cooling] Procedure."</p> <p>2). On 3/31/14 at 11:00 a.m., observed Cook #1 preparing lunch meal with a cap on and no hairnet, with hair hanging loose under cap. DA #2 (dietary aide) observed with hairnet and cap on, but hair hanging loose on the sides.</p>			

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	<p>On 3/31/14 at 12:30 p.m., interview with the FSD (Food Service Director) indicated, when asked what is the facility policy on hair covering, "Unless it's a lot of hair, policy says everyone to wear a cap."</p> <p>Observed DA #2 walked over by the kitchen door, retrieved a hairnet and placed on her head.</p> <p>On 3/31/14 at 2:36 p.m., received "Dietary Hair Restraint Policy and Procedures" no date from the Administrator who indicated the policy is currently used by the facility. The policy indicated, " ...All Dining Service employees will be required to wear hair restraints as required by the 2009 Federal Food Code; Hair Restraints 2-402.11 Effectiveness. (Federal Food Code) (A) Except as provided in [paragraph] (B) of this section, food employees shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively keep their hair from contacting exposed food; clean equipment, utensils, and linens; and unwrapped single-service and single-use articles. (B) This section does not apply to food employees a such as counter staff who only serve beverages and wrapped or packaged foods, hostesses, and wait staff if they present a minimal risk of contaminating exposed food; clean equipment, utensils and linens; and unwrapped single-service and single-use articles. ... Trilogy has chosen ... caps ... for our restraint policy, ... This hat will be worn to effectively keep hair from contacting exposed food. Those employees that have hair that extrudes out of the cap will be required to have hair wrapped into a bun style or tucked under hat. ... Food Service employees will</p>			

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	<p>wear hair restraints while in all food preparation areas."</p> <p>Review on 3/25/14 at 3:00 p.m., of "RETAIL FOOD ESTABLISHMENT SANITATION REQUIREMENTS MANUAL TITLE 410 IAC 7-24" dated November 13, 2004 indicated, " ... Sec. (section) 138 (a) Except as provided in subsection (b), food employees shall wear hair restraints, such as hats, hair coverings or nets, beard restraints, ... that are designed and worn to effectively keep their hair from contacting: (1) exposed food; (2) clean equipment, utensils, and linens; and (3) unwrapped single-service and single-use articles. (b) This section does not apply to food employees, such as counter staff who only serve beverages and wrapped or packaged foods, hostess, and wait staff, if they present a minimal risk of contaminating: ..."</p> <p>3). On 4/1/14 Residents who resided on on the skilled nursing care units were observed to be served meals in the residential dining room.</p> <p>On 4/1/14 at 11:55 p.m., observed the DM without gloves and walked over to the steam table. He then used his bare hands to touch a hamburger bun and stuck the thermometer in the meat. When asked what he had just done to the hamburger bun, DM indicated, "Taking temperatures on a hamburger." When asked if he touched it with his bare hands, indicated, "Oh, did I do that?"</p> <p>On 4/1/14 at 12:00 p.m., observed DA #1</p>			

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R000000	<p>standing in the residential dining room by the steam table and dropped one of her gloves on the floor. She then bent down to pick the glove up, walked over to the trash can in the dining room and threw the glove in the trash can. No hand washing was observed. She then entered the kitchen, placed gloves on, walked into dining area and stood by the steam table. No hand washing was observed.</p> <p>On 4/14/14 at 12:28 p.m., interview with DA #1 when asked when should she hand wash indicated, "Every time you handle a different food, after touching dirty dishes, after touching the door knobs." When asked if handwashing was done, DA #1 shrugged her shoulders, indicating that she didn't know.</p> <p>On 3/31/14 at 2:12 p.m., the Director of Nursing (DON) provided the "Guidelines for Handwashing", dated 10/2004, and indicated this policy was the one being used by the facility. The policy indicated, "Purpose: Handwashing is the single most important factor in preventing transmission of infections. Inadequate handwashing has been responsible for many outbreaks of infectious disease in LTCF [Long Term Care Facility]...Procedure: 1. All health care workers shall wash their hands frequently and appropriately...3. Health Care Workers shall wash hands at times such as:...b. Before/after preparing/serving meals, drinks..."</p> <p>3.1-21(i)(2) 3.1-21(i)(3)</p>	R000000	The submission of this plan of correctgion does not indicate an				

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R000273	<p>The following residential findings were cited in accordance with 410 IAC 16.2-5.</p> <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, interview, and record review, the facility failed to ensure food was discarded from 1 out 1 dry storage room, 1 of 1 walk in refrigerator, and 1 out 1 walk in freezer when the expiration date had passed, the covering of hair while working in the kitchen, and infection control practices were</p>	R000273	<p>admission by Hearthstone Health Campus that the findings and allegations contained herein are an accurate and true representation of the quality of care provided to the residents of Hearthstone Health Campus. This facility recognizes it's obligation to provide legally and medically necessary care and service to its residents in an economic and efficient manner. The facility herby maintains it is in substantial compliance with the requirements of participation for residential health care facilities. To this end, this plan of correction shall serve as the credible allegation of complaince with all state and federal requirements governing the management of this facility. It is thus submitted as a matter of statue only. The facility respectfully request from the Department a desk review for paper compliance.</p> <p>The residents suffered no ill effects from the alleged deficiencies. All food products not dated or expired were disposed of immediately. Dietary staff were in serviced on hair restraints and hand washing/glove useCompletion Date 3-31-2014All residents have</p>	04/18/2014			

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	<p>followed in the kitchen by facility staff as indicated by facility policy. This deficient practice had the potential to affect 23 out of 23 residents being served out of the kitchen. (DA #1 (Dietary Aide), Dietary Manager (DM), Administrator).</p> <p>Findings include:</p> <p>1). A. On 3/31/14 at 10:40 a.m., with the FSD (Food Service Director) present observation of the walk in refrigerator indicated the following:</p> <p>Green leafy vegetable [FSD indicated lettuce]. No identifiable label was observed.</p> <p>Potatoes slices in a plastic bag, which were brownish in color with brownish color water inside the baggie. The FSD removed the baggie at that time.</p> <p>A green leafy vegetable in a plastic bag [FSD indicated spinach]. No identifiable label was observed on the bag.</p> <p>An opened cole slaw, no documented open date.</p> <p>Carrots wrapped in plastic, no open date was observed on the wrapping</p> <p>Strawberries in a container with a expiration date of 3/30/14.</p> <p>Three individually wrapped slices of leftover meatloaf was observed not to have a cooked date.</p> <p>Plate of pork and figs with a freeze by date of 3/20/14. The FSD indicated, "Oh it's expired, because the freeze by date is</p>		<p>the portential to be affected by the alleged deficient practice and through alterations in processes and in servicing will ensure the campus procures food from sources approved or considered satisfactory by Federal, State or local authorities and stores, prepares, distributes and serves food under sanitary conditions. Completion Date: 4-18-2014 All dietary employees have been in-serviced on Storage Procedures for dry food, refrigerated food, leftover food storage, food labeling. In-services with dietary staff also completed for hair restraints and guidelines for hand washing/glove use. Systemic changes are as follows- all food items (dry, refrigerated and frozen) will be stored in their original containers. Once opened, the item will be resealed in original container or placed into an appropriate storage container with covering. All food items will be identified, labeled and dated when opened. If appropriate the item will have the written expiration date. The campus will post Refrigerator and Storage Chart for reference on expiration/use thru date. The day and night cook will be required to complete a walk thru of the cooler, freezer and dry storage prior to leaving for the day to assure all food stored per guidelines and expired food discarded. Kitchen staff will wear a hairnet under the cap if their is</p>				

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	<p>3/20/14."</p> <p>An opened raisin bread with no documented open date. The FSD indicated, "Oh that came in on Friday." Observed the FSD to remove the raisin bread at that time.</p> <p>An open bag of Brie without an expiration date.</p> <p>A tub of Ricotta cheese dated 3/14/14.</p> <p>Vegetable base no open nor expiration date. The FSD was observed to remove and discard the out of date items at that time.</p> <p>Five opened tubs of horse relish. Four with an open date of 2/14/14 and no expiration date. One with no documented open date. The FSD indicated, "We keep for 30 days. I will throw them out."</p> <p>Observed an odor in the refrigerator and observed raw hamburger patties uncovered on a tray in the refrigerator and cooked chicken tenders uncovered on pan in the refrigerator. When asked what is that odor? The FSD indicated, "Oh that's the cooked chicken tenders that we have in here to cool down."</p> <p>B. On 3/31/14 at 10:55 a.m., observation of the dry storage room indicated the following:</p> <p>An open pack of citrus gel [gelatin mix] with no documented open date.</p> <p>An open baggie of graham cracker crumbs with no documented open date nor expiration date.</p> <p>A box of ice coffee with no documented open</p>		<p>hair hanging loose. All kitchen employees will complete a competency check off for hand washing and glove usage now and annually thereafter. Completion Date 4-18-2014 ED/Designee will complete unannounced audit of kitchen for storage of food, proper hair restraints and hand washing/glove use 5 x's a week for a month, then 3 x's a week for a month then 1 x weekly for 4 months. These audits will be conducted during a meal service either breakfast, lunch or dinner randomly throughout the week including weekends. The results then forwarded to QA committee monthly x's 6 months and quarterly thereafter for review and further suggestions/comments. Completion Date 4-18-2014</p>				

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	<p>date and no expiration date.</p> <p>An opened box of crisp rice cereal with no documented open date nor expiration date.</p> <p>An opened bag of fudge brownie mix with no documented open date nor expiration date. The FSD indicated, "I'll throw them out, it's open then it's not good. I don't want to guess."</p> <p>C. On 3/31/14 at 11:10 a.m., observation of the walk in freezer indicated the following:</p> <p>Two packs of super sweet corn with no documented open date and no expiration date. One pack had plastic wrap hanging and not secure on package.</p> <p>One bag of broccoli florets with no documented open date.</p> <p>On 3/31/14 at 2:36 p.m., received "Storage Procedures" dated 2009, from the ADM (administrator) and indicated that was the current policy used by the facility. The policy indicated, "... DRY STORAGE OF FOOD ... 6. Open packages are labeled, dated, and stored in closed containers. ... REFRIGERATED STORAGE ... 5. Food is covered, dated and stored loosely to permit air circulation. ...7. Prepared perishables such as salads, puddings, milk, etc., are stored in a refrigerator and covered, labeled, and dated until used. ...9. Food items are arranged so that older items will be used first. 10. Leftovers are refrigerated immediately and used within 72 hours or frozen."</p> <p>On 3/31/14 at 2:36 p.m., received "Food Labeling Guideline" dated 4/2013, from the ADM (administrator) and indicated that was</p>			

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NAME OF PROVIDER OR SUPPLIER HEARTHSTONE HEALTH CAMPUS	STREET ADDRESS, CITY, STATE, ZIP CODE 3043 NORTH LINTEL DRIVE BLOOMINGTON, IN 47404
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	<p>the current policy used by the facility. The policy indicated, "...Date Marking Best Practice, ... To monitor and limit refrigeration time, refrigerated ready-to-ear (RTE) potentially hazardous food must be date marked to assure that the food is either consumed or discarded within seven days. Date marking must be done when food is: ... Refrigerated; and held more than 24 hours. Date marking of food prepared in the food establishment: ... foods must be marked with the date of preparation, and must be consumed or discarded within seven days including the day of preparation. ... Manufactures use by date or expiration date supersedes our date mark best practice. Prepared Leftover food items must be discarded within 3 days- please see below the Safe Food Cooing [cooling] Procedure."</p> <p>2). On 3/31/14 at 11:00 a.m., observed Cook #1 preparing lunch meal with a cap on and no hairnet, with hair hanging loose under cap. DA #2 (dietary aide) observed with hairnet and cap on, but hair hanging loose on the sides.</p> <p>On 3/31/14 at 12:30 p.m., interview with the FSD (Food Service Director) indicated, when asked what is the facility policy on hair covering, "Unless it's a lot of hair, policy says everyone to wear a cap."</p> <p>Observed DA #2 walked over by the kitchen door, retrieved a hairnet and placed on her head.</p> <p>On 3/31/14 at 2:36 p.m., received "Dietary Hair Restraint Policy and Procedures" no date from the Administrator who indicated the policy is currently used by the facility. The policy indicated, " ...All Dining Service</p>			

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	<p>employees will be required to wear hair restraints as required by the 2009 Federal Food Code; Hair Restraints 2-402.11 Effectiveness. (Federal Food Code) (A) Except as provided in [paragraph] (B) of this section, food employees shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively keep their hair from contacting exposed food; clean equipment, utensils, and linens; and unwrapped single-service and single-use articles. (B) This section does not apply to food employees a such as counter staff who only serve beverages and wrapped or packaged foods, hostesses, and wait staff if they present a minimal risk of contaminating exposed food; clean equipment, utensils and linens; and unwrapped single-service and single-use articles. ... Trilogy has chosen ... caps ... for our restraint policy, ... This hat will be worn to effectively keep hair from contacting exposed food. Those employees that have hair that extrudes out of the cap will be required to have hair wrapped into a bun style or tucked under hat. ... Food Service employees will wear hair restraints while in all food preparation areas."</p> <p>Review on 3/25/14 at 3:00 p.m., of "RETAIL FOOD ESTABLISHMENT SANITATION REQUIREMENTS MANUAL TITLE 410 IAC 7-24" dated November 13, 2004 indicated, " ... Sec. (section) 138 (a) Except as provided in subsection (b), food employees shall wear hair restraints, such as hats, hair coverings or nets, beard restraints, ... that are designed and worn to effectively keep their hair from contacting: (1) exposed food; (2) clean equipment, utensils, and linens; and (3) unwrapped single-service and single-use</p>			

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	<p>articles. (b) This section does not apply to food employees, such as counter staff who only serve beverages and wrapped or packaged foods, hostess, and wait staff, if they present a minimal risk of contaminating: ..."</p> <p>3). On 4/1/14 Residents who resided on on the skilled nursing care units were observed to be served meals in the residential dining room.</p> <p>On 4/1/14 at 11:55 p.m., observed the DM without gloves and walked over to the steam table. He then used his bare hands to touch a hamburger bun and stuck the thermometer in the meat. When asked what he had just done to the hamburger bun, DM indicated, "Taking temperatures on a hamburger." When asked if he touched it with his bare hands, indicated, "Oh, did I do that?"</p> <p>On 4/1/14 at 12:00 p.m., observed DA #1 standing in the residential dining room by the steam table and dropped one of her gloves on the floor. She then bent down to pick the glove up, walked over to the trash can in the dining room and threw the glove in the trash can. No hand washing was observed . She then entered the kitchen, placed gloves on, walked into dining area and stood by the steam table. No hand washing was observed.</p> <p>On 4/14/14 at 12:28 p.m., interview with DA #1 when asked when should she hand wash indicated, "Every time you handle a different food, after touching dirty dishes, after touching the door knobs." When asked if handwashing was done, DA #1 shrugged her</p>			

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	<p>shoulders, indicating that she didn't know.</p> <p>On 3/31/14 at 2:12 p.m., the Director of Nursing (DON) provided the "Guidelines for Handwashing", dated 10/2004, and indicated this policy was the one being used by the facility. The policy indicated, "Purpose: Handwashing is the single most important factor in preventing transmission of infections. Inadequate handwashing has been responsible for many outbreaks of infectious disease in LTCF [Long Term Care Facility]...Procedure: 1. All health care workers shall wash their hands frequently and appropriately...3. Health Care Workers shall wash hands at times such as:...b. Before/after preparing/serving meals, drinks..."</p>			