

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155684	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 01/19/2016
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NAME OF PROVIDER OR SUPPLIER SOUTHFIELD VILLAGE	STREET ADDRESS, CITY, STATE, ZIP CODE 6450 MIAMI CIR SOUTH BEND, IN 46614
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F 0000 Bldg. 00	<p>This visit was for a Recertification and State Licensure Survey. This visit included a State Residential Licensure Survey.</p> <p>Survey dates: January 12, 13, 14, 15 and 19, 2016</p> <p>Facility number: 002662 Provider number: 155684 AIM number: 200315930</p> <p>Census bed type: SNF: 14 SNF/NF: 41 Residential: 55 Total: 110</p> <p>Census payor type: Medicare: 5 Medicaid: 24 Other: 26 Total: 55</p> <p>This deficiency reflects State findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>Quality Review completed by 14454 on January 20, 2016.</p>	F 0000	<p>This plan of correction constitutes the written allegation of compliance for the deficiencies cited. The submission of this Plan of Correction is not an admission that a deficiency exists or that a deficiency was cited correctly. The Plan of Correction is being submitted to meet the requirements established by state and federal law.</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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F 0371 SS=E Bldg. 00	<p>483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY</p> <p>The facility must - (1) Procure food from sources approved or considered satisfactory by Federal, State or local authorities; and (2) Store, prepare, distribute and serve food under sanitary conditions</p> <p>Based on observation and interview, the facility failed to serve food and drinks in a sanitary manner for 2 of 2 dining rooms observed. (Main dining room and Assisted dining room)</p> <p>Finding includes:</p> <p>On 1-12-2016 from 11:40 A.M. to 12:30 P.M., a dining observation was conducted and the following was observed:</p> <p>At 11:43 A.M., Wait staff #2 served 2 glasses of orange juice to 2 residents at Table 14 in the Assisted dining room by holding both in one hand and filling them, then took his free hand and with the palm over the opening to the glass, served the glasses to the residents.</p> <p>At 11:44 A.M., Wait staff #2 opened a small carton of chocolate milk to pour into a glass for a resident. He bent back the spout and then stuck his thumb into the carton to open the spout the rest of</p>	F 0371	<p>It is the policy of Southfield Village to store, prepare, distribute and serve food under sanitary conditions. No residents were adversely affected by this alleged deficiency. The identified residents are now being served in a manner to minimize cross contamination. All other residents who receive meals have the potential to be affected by this practice and will be served in a manner to minimize cross contamination.</p> <p>Systemically, a new policy and procedure to address storing, preparing, distributing and serving of food has been developed. Additionally, all staff who serves beverages and/or food to the residents have been in-service on this policy and the proper serving techniques to be used. The Director of Culinary Services or his designee will monitor breakfast, lunch and dinner, two times each week for thirty days for compliance. If at any time a resident is served in a manner that contradicts the policy, the action will be stopped</p>	02/18/2016

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	<p>the way and poured it into the glass and served the resident.</p> <p>At 11:45 A.M., Wait staff #2 served 2 glasses of cranberry juice to 2 residents at Table 16 in the Assisted dining room by placing his palm over the opening to the glass and placing them onto the table.</p> <p>At 11:50 A.M., CNA (Certified Nursing Assistant) #3 served was observed holding a glass with her fingers around the top rim, filling it with water and placing it in front of a resident in the Main dining room. CNA #3 then touched several residents on their backs while talking to them and then picked up another glass, touching the rim with her fingers and filled and served the glass. CNA #3 opened a small carton of chocolate milk by bending the spout back and pushing her thumb into the carton to open it further. She then poured the chocolate milk into a glass and served it to a resident.</p> <p>At 11:58 A.M., Wait staff #2 was observed to serve a bowl of fruit with his palm over the top of the bowl.</p> <p>At 12:07 P.M., Wait staff #2 served a plate of food with his thumb on top of the plate, he then touched his pants and placed his hand into his pocket and</p>		<p>andthe resident served correctly. Themonitoring will continue for a minimum of thirty days or until 100% complianceis achieved at all three meals. Theresults of the meal monitoring will be reported to the Resident WellnessCommittee, a subcommittee of the Quality Assurance and Process ImproveCommittee (QAPI). The Director ofCulinary Services and the Director of Nursing are responsible to carry out theplan of correction.</p>	

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R 0000 Bldg. 00	<p>picked up another plate of food with his thumb on top of the plate and served it in the Main dining room.</p> <p>During an interview on 1-19-2016 at 10:54 A.M., the Dining Room Manager indicated meal plates should be held from the bottom to be served, and the thumb should never be over the rim of the plate. She indicated glasses should be grasped from the middle of the glass and never at or over the rim. The Dining Room Manager further indicated milk cartons must never be opened by grasping the inside of the carton spout with the hand.</p> <p>On 1-19-2016 at 1:30 P.M., the Dining Room Manager indicated that they did not have a policy to address these concerns.</p> <p>3.1-21(i)(2)</p> <p>This visit was for a State Residential Licensure Survey.</p>	R 0000	This plan of correction constitutes the written allegation of compliance	

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	Residential census: 55 Residential sample: 7 Southfield Village was found to be in compliance with 410 IAC 16.2-5 in regard to the State Residential Licensure Survey.		for the deficiencies cited. The submission of this Plan of Correction is not an admission that a deficiency exists or that a deficiency was cited correctly. The Plan of Correction is being submitted to meet the requirements established by state and federal law.		