

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 06/13/2013
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NAME OF PROVIDER OR SUPPLIER WOOD RIDGE ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 17650 GENERATIONS DR SOUTH BEND, IN 46635
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R000000	<p>This visit was for the Investigation of Complaint #IN00128789.</p> <p>Complaint #IN00128789 - Substantiated. State residential deficiency related to the allegation is cited at R154.</p> <p>Survey date: 6/13/13.</p> <p>Facility Number: 001148 Provider Number: 001148 AIM Number: N/A</p> <p>Survey team: Shelly Vice, RN-TC</p> <p>Census bed type: Residential: 69</p> <p>Census payor type: Other: 69</p> <p>Sample: Kitchen</p> <p>This state finding is cited in accordance with 410 IAC 16.2.</p> <p>Quality Review completed on 6/14/13, by Brenda Meredith, R.N.</p>	R000000	<p>New weekly cleaning schedule sheets have been created. Kitchen staff will initial when they have completed the daily, weekly, bi-monthly or monthly tasks. Walk in freezer is scheduled to be swept and mopped daily. Dining Services Coordinator or designee will audit sheets daily to be sure that tasks are completed. Audited sheets will be kept in a file. Sheets will be used starting 7/2/13. An In-service with Dietician and kitchen staff to review sheets and training on them is scheduled for July 9, 2013.</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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R000154	<p>410 IAC 16.2-5-1.5(k) Sanitation and Safety Standards - Deficiency (k) The facility shall keep all kitchens, kitchen areas, common dining areas, equipment, and utensils clean, free from litter and rubbish, and maintained in good repair in accordance with 410 IAC 7-24.</p> <p>Based on observations, record reviews and interviews, the facility failed to clean the walk-in refrigerator, located within the kitchen, on a regular basis.</p> <p>Finding includes:</p> <p>On 6/13/13 at 1:30 p.m., a tour of the walk in refrigerator located within the kitchen was conducted with the Dietary Manager and the Administrator. The Dietary Manager indicated the cleaning of the unit was not properly accounted for and the logs for cleaning were not up to date nor organized.</p> <p>On 6/13/13 from 1:45 p.m. to 2:10 p.m. interviews of the on duty kitchen staff were conducted.</p> <p>At 1:45 p.m., Staff #10 indicated an unsure knowledge of when the walk in refrigerator had been cleaned last and had not done this cleaning task.</p> <p>At 1:50 p.m., Staff #11 indicated an action of "...sweep and mop</p>	R000154	<p>New weekly cleaning schedule sheets have been created. Kitchen staff will initial when they have completed the daily, weekly, bi-monthly or monthly tasks. Walk in freezer is scheduled to be swept and mopped daily. Dining Services Coordinator or designee will audit sheets daily to be sure that tasks are completed. Audited sheets will be kept in a file. Sheets will be used starting 7/1/13. An In-service with Dietician and kitchen staff to review sheets and training on them is scheduled for July 9, 2013. The administrator will review the sheets periodically.</p>	07/01/2013			

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	<p>everything in the kitchen..." yet could not indicate when the walk in refrigerator cleaning had been completed.</p> <p>At 1:55 p.m., Staff #12 indicated an unsure knowledge of when the walk in refrigerator had been cleaned last and had not done this cleaning task.</p> <p>It was noted that Staff #10, #11 and #12 had not seen the cleaning log prior to today.</p> <p>On 6/13/13 at 2:00 p.m., the cleaning logs were reviewed. The most current record was dated, "May 2013" with the chronologically next to most current being dated for "December 2012." The logs were confusing and not organized. The Dietary Manager indicated the cleaning logs were not available for the missing months and shifts. An item labeled, "Monthly: Clean racks in walk-in cooler" was noted on the bottom of a cleaning log titled, "11:30 pm- 6:30 pm[sic]" yet there was not a delegated cleaning for the walk in refrigerator minus the 'racks.'</p> <p>On 6/13/13 at 2:15 p.m., the Dietary Manager indicated that the cleaning of the walk in refrigerator could not be accounted for as to when it had been</p>						

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	cleaned last.			