

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155280	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 11/06/2015
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NAME OF PROVIDER OR SUPPLIER WATERS OF DILLSBORO-ROSS MANOR, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 12803 LENOVER ST DILLSBORO, IN 47018
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F 0000 Bldg. 00	<p>This visit was for the Investigation of Complaint IN00184636.</p> <p>Complaint IN00184636 - Substantiated. Federal/state deficiencies related to the allegations are cited at F371.</p> <p>Survey date: November 6, 2015</p> <p>Facility number: 000178 Provider number: 155280 AIM number: 100273840</p> <p>Census bed type: SNF/NF: 85 Total: 85</p> <p>Census payor type: Medicare: 8 Medicaid: 63 Other: 14 Total: 85</p> <p>Sample: 3</p> <p>These deficiencies reflect State findings cited in accordance with 410 IAC 16.2-3.1.</p> <p>QR completed by 34849 on November 12, 2015.</p>	F 0000	Preparation and/or execution of this plan of correction in general, or this corrective action in particular, does not constitute an admission of agreement by this facility of the facts alleged or conclusions set forth in this statement of deficiencies. The plan of correction and specific corrective actions are prepared and/or executed in compliance with state and federal laws.	

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=F Bldg. 00	<p>483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY 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 Based on observation, interview and record review, the facility failed to store and serve food under sanitary conditions related to labeling and storing food, general kitchen cleanliness, and hand washing. This practice had the potential to affect 85 of 85 residents who receive meals prepared in the facility kitchens. Findings include: An initial tour of the Ross Manor kitchen was made with the Administrator on 11/6/2015 at 10:04 a.m. The Administrator did not perform hand washing upon entering the kitchen. An initial tour of the main kitchen was made with the Administrator and the Dietary Manager (DM) on 11/6/2015 at 10:26 a.m. Upon entering, the kitchen door next to the hand washing station, which led outside, was observed to be propped open with a black trash can. The</p>	F 0371	<p>All persons who enter the dietary kitchen wash their hands upon entrance. The kitchen door next to the hand washing station which leads outside is not propped open. It is kept closed except for the minimal time required to enter and exit. The kitchen floor has had all debris, splatters and/or stains removed and it has been thoroughly cleaned. The kitchen floor is on a routine cleaning schedule. The dry storage closet has been organized and any opened and/or empty plastic food packets have been discarded. This closet has been thoroughly cleaned and is on a routine cleaning schedule.</p>	11/30/2015

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	<p>Administrator and the DM did not perform hand washing upon entering the kitchen.</p> <p>During the initial tour, the following was observed:</p> <ol style="list-style-type: none"> 1) Throughout the kitchen, the floor had food splatters/stains, tree leaves and multiple areas of discoloration. 2) In the dry storage closet, several open and empty, plastic food packets were on the floor. 3) In the freezer room were three ceiling panels with dark grey-black discoloration; one of which was dislodged. 4) In the freezer room, a dark-grey to black fluff-like substance, approximately 3 inches in size, was hanging over freezer # 1 (2 door). 5) In the freezer room, a large, light grey web-like substance was observed, near the ceiling in the corner from the south to the west wall; which the Administrator indicated was a cob web. 6) Observed around and beside the refrigerator were darkened, wilted lettuce leaves, tree leaves, a plastic cup, and 1 metal object identified by the DM as a shelving hook for the refrigerator. 		<p>The freezer room's ceiling tiles have been repaired/replaced and the ceiling is clean. There are no "fluff like" substances or cobwebs present. The freezer room is on a routine cleaning schedule. Note: Maintenance will clean the freezer room ceiling. The area around the refrigerator is free of debris and has been thoroughly cleaned. This area is on a routine cleaning schedule. The area around the exhaust fan in the dietary kitchen, as well as the exhaust fan itself, has been thoroughly cleaned. This area is on a routine cleaning schedule. Note: Maintenance will clean the exhaust fan and the surrounding area. Freezer #1 and Freezer #2 have been cleaned out and then thoroughly cleaned. Any food found to have been opened/undated/outdated or unsafe has been discarded. Both freezers are on a routine cleaning schedule. The refrigerator has been cleaned out and thoroughly cleaned.</p>	

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	<p>7) A dark grey-black discoloration was observed surrounding a large exhaust fan mounted on the north wall and grey-black clumps of dust were hanging from the area above the exhaust fan and on individual parts of the fan.</p> <p>8) In Freezer # 1 (2 door), two large brown tubs of ice cream were observed with the lids partially removed and ice cream open to air.</p> <p>9) In Freezer # 2 (3 door), there was one large clear plastic bag of breadsticks, open, undated and untied.</p> <p>10) In the refrigerator, three large, clear, undated bags of chopped lettuce were observed with multiple brown, liquid areas. The DM indicated she received the lettuce on 11/3/2015 and indicated, "I couldn't write on them because they were wet". The DM indicated she planned to serve the lettuce "tonight or tomorrow for the salad bar."</p> <p>11) Flour and Sugar self-standing storage bins were located under a large sink and were observed to have a large amount of thick, dried, caked-on brown substance on the clear lids. The DM opened the left bin, which was not marked, and used her bare hands to open the unsealed, partially</p>		<p>Any food found to have been opened/undated/outdated or unsafe has been discarded. The refrigerator is on a routine cleaning schedule. The flour and sugar bins have been thoroughly cleaned. They are clearly labeled. Dietary staff who work with these bins do not reach into them with their bare hands. The Dietary Manager and all dietary staff perform proper hand hygiene as indicated based on the task they perform. As stated prior, there are currently cleaning schedules in place to ensure appropriate cleaning in all of the afore mentioned areas as per the Dietary Policies and Procedures which are currently in place as well.</p> <p>This finding has the potential to affect all residents who consume meals prepared in the facility's dietary kitchen. The Administrator/Designee</p>	

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	<p>opened bag of flour, touching the inside of the bag and contents. She then opened the right bin, which was not marked, and used her bare hands to open the unsealed, partially open bag of sugar, touching the inside of the bag and contents. The DM indicated, "These need cleaned".</p> <p>The DM did not perform hand washing at any time during the tour. The DM indicated she was "in the process of getting a cleaning schedule" since beginning employment as the DM approximately three weeks prior. She indicated she was not aware of any guidelines or policies regarding kitchen cleaning/sanitization schedules. The DM indicated she removed the previous posted cleaning schedules because, "They was [sic] all masking taped over, so you couldn't see them...Most of them's [sic] [kitchen staff] been here longer than me, so they know [the cleaning schedule]".</p> <p>The DM indicated the floor was to be swept and mopped between each meal, but it had not been done that day.</p> <p>Dietary Cook # 2 was interviewed on 11/6/2015 at 10:50 a.m. She indicated she had worked in the kitchen for approximately two years. She indicated,</p>		<p>will monitor the kitchen sanitation via a monitoring tool 3 times weekly on various shifts to ensure that the following is taking place:</p> <ul style="list-style-type: none"> a. Appropriate hand washing and glove usage in the dietary department b. Kitchen floor clean free of debris c. Kitchen ceiling clean free of stains/broken tiles/cobwebs/other d. Dry Storage Closet clean/dry/organized—food properly labeled/dated e. Freezer Room floor and ceiling clean/dry free of debris/cobwebs/other f. Area around refrigerator is clean/dry/free of debris/cobwebs/other 	

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	<p>"No one ever really followed [a cleaning/sanitizing schedule]. If it needed cleaned, they cleaned it. Back when I started two years ago [there was a cleaning schedule], but nothing since".</p> <p>On 11/6/2015 at 11:00 a.m., the Administrator indicated a routine cleaning schedule should have been a priority for the DM.</p> <p>The Maintenance Director was interviewed on 11/6/2015 at 12:23 p.m. He indicated the fans and ceiling tiles would "fall on Maintenance" to clean/maintain. The Maintenance Director indicated cleaning the fan and/or ceiling tiles was not included anywhere in the monthly maintenance log check list.</p> <p>On 11/6/2015 at 1:07 p.m., the Administrator indicated the facility policy is "not to prop open the [kitchen] door."</p> <p>The current "Food Storage" policy and procedure, provided by the Administrator on 11/6/2015 at 1:09 p.m., indicated, "Policy: Food shall be stored...in a clean, dry area, free from contaminants...and using appropriate methods to ensure the highest level of food safety. Procedure:</p>		<p>g. Area around the exhaust fan and the fan itself clean/dry/free of debris/cobwebs/other</p> <p>h. Freezers #1 and #2 are clean with no food that is not properly stored/labeled/dated</p> <p>i. Refrigerators are clean with no food that is not properly stored/labeled/dated</p> <p>j. Flour and Sugar bins clean/dry staff using them with proper technique (not bare hands)</p> <p>k. Monitor all now posted cleaning schedules to see that they are current and show evidence</p> <p>of documented cleaning having been completed</p> <p>l. Monitor to see that Dietary Policy and Procedure guidelines are being enforced</p>	

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	<p>...Label all food items held for longer than twenty four hours. The label must include the...date by which is should be sold, consumed, or discarded...Wrap food properly. Never leave any food item uncovered and not labeled..."</p> <p>The current "Glove and Handwashing Procedures" policy and procedure was provided by the Administrator on 11/6/2015 at 1:09 p.m. The procedure indicated, "...3. All employees will wash hands upon entering the kitchen from any other location...and between all tasks. 4. Employees will wash hands before and after handling foods.... 5. Gloves are to be used whenever direct food contact is required...."</p> <p>The current "Date Marking" policy and procedure was provided by the Administrator on 11/6/2015 at 1:09 p.m. The procedure indicated, "...2. Date marking for refrigerated storage food items: ...Once a case is opened, the individual, refrigerated food items are dated with the date the item was received into the facility and placed in proper storage...."</p> <p>This Federal tag relates to Complaint IN00184636.</p>		<p>This monitoring will continue until 4 consecutive weeks of zero negative findings are achieved.</p> <p>Afterwards, monitoring will occur weekly for a period of 6 months to ensure ongoing compliance. After that, random audits will occur.</p> <p>Note: Any concerns discovered during the monitoring will be corrected immediately.</p> <p>The Dietary Staff will all be inserviced by 11/23/15 on the following:</p> <ul style="list-style-type: none"> a. Hand washing/ glove usage in dietary b. Kitchen Sanitation—Environment (floors, equipment, prep areas, refrigerator/freezers etc.) c. Food storage/labeling/dating—whe 	

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	3.1-21(i)(2) 3.1-21(i)(3)		<p>n to discard food items</p> <p>d. Dietary Doors (cannot prop open)</p> <p>e. Cleaning Schedules</p> <p>f. Food delivery-checking food in as acceptable</p> <p>g. Supplies-when to order new supplies</p> <p>The Maintenance staff will be inserviced on cleaning ceiling and exhaust fan in dietary kitchen as part of the Preventive Maintenance Program.</p> <p>Any staff who fail to comply with the points of the inservices will be further educated and/or progressively disciplined as indicated.</p> <p>At the monthly Quality Assurance meetings the results of the Dietary</p>	

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			monitoring will be reviewed. Any concerns will have been corrected as found. Any patterns will addressed in an Action Plan written by the committee and monitored by the Administrator weekly until resolution.		