

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 01/04/2013
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NAME OF PROVIDER OR SUPPLIER CHRISTINA HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 1435 CHRISTIAN BLVD FRANKLIN, IN 46131
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R0000	<p>This visit was for the Invesitgation of Complaint IN00121829.</p> <p>This visit was in conjunction with the State Residential Licensure Survey.</p> <p>Complaint IN00121829 - Substantiated. State residential deficiencies related to the allegations are cited at R154.</p> <p>Survey dates: January 2, 3, and 4, 2013</p> <p>Facility number: 004017 Provider number: 004017 AIM number: N/A</p> <p>Survey team: Dinah Jones, RN - TC Patti Allen, BSW</p> <p>Census bed type: Other: 61 Total: 61</p> <p>Census payor type: Other: 61</p>	R0000		

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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	<p>Total: 61</p> <p>Sample: 3</p> <p>These state findings are cited in accordance with 410 IAC 16.2.</p> <p>Quality Review completed on January 15, 2013; by Kimberly Perigo, RN.</p>			

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R0154	<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 observation and interview, the facility failed to maintain clean dining room tables in one (1) of one (1) dining room. This had the potential to affect 61 of 61 residents residing in the facility.</p> <p>Findings include:</p> <p>On 1/4/13 at 10:00 a.m., a resident who wished to remain confidential, voiced concerns about the dining room table cloths being visibly soiled. The resident indicated staff served the residents on these tables every day without cleaning the cloths or replacing the table cloths. The resident indicated, "would you like to eat off these dirty table cloths?"</p> <p>On 1/4/13 at 9:15 a.m., a telephone interview with a family member indicated that the tables cloths were always soiled and the floors were sticky and dirty.</p>	R0154	<p>Citation</p> <p>R 154</p> <p>410 IAC 16.2-5-1.5(k) Sanitation and Safety Standards – Deficiency What corrective action will be accomplished for those residents found to have been affected by the deficient practice? No residents were found to be affected. How will the facility identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken. No other residents were found to be affected. What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur? The Residence Director re-educated staff as to the necessity to maintain physical plant standards in accordance with the Indiana state regulation R 154 410 IAC 16.2-5-1.5(k) Sanitation and Safety. The staff will replace dining table clothes as needed after every meal served. The Residence Director and/or Dining Services Coordinator</p>	02/15/2013

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	<p>On 1/4/13 at 2:00 p.m., an observation of 18 of 18 dining tables being set up for the evening meal, there were 12 table cloths that were visibly soiled. They had food particles, crumbs, and dried stains on them. One table was without a table cloth. The dining room floor had pieces of food and crumbs from both breakfast and lunch.</p> <p>On 1/4/13 at 3:15 p.m., during an interview with the Residence Director, he indicated the tables were soiled and needed to be clean. He indicated the facility did not have a written policy for changing the table cloths. The staff are to clean the table cloths before setting the tables up for the next meal, and change the table cloth if necessary, otherwise they are changed after the last meal of the day. He indicated this had the potential to affect 61 of 61 residents residing in the facility.</p> <p>This Residential deficiency relates to Complaint IN00121829.</p>		<p>will monitor to ensure compliance. The Residence Director also developed and implemented a third shift cleaning schedule that is to be completed by staff to ensure cleanliness of the dining room. The Residence Director will be responsible to ensure continued compliance with our cleaning standards and expectations.</p> <p>How will the corrective action be monitored to ensure the deficient practice will not recur, i.e. what quality assurance program will be put in place and by what date will the systemic changes be completed?</p> <p>The Residence Director and/or Designee will conduct random daily walking rounds of community to ensure continued compliance with the above referenced regulation for a period of three months. Audits will be reviewed during the house Quality Assurance process in determination for ongoing monitoring at that time. Findings suggestive of compliance will result in cessation of the monitoring plan once compliance is achieved.</p> <p>Compliance Date: February 15, 2013</p>	

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