STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	X2) MULTIPLE CONSTRUCTION A. BUILDING / B. WING	X3) DATE SURVEY COMPLETED
	155600	A. BUILDING 00 / B. WING	02/29/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MULBERRY HEALTH & REHABILITATION CENTER	502 W JACKSON ST MULBERRY, IN 46058

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F 0000 Bldg. 00	This visit was for a Recertification and State Licensure Survey. This visit included a State Residential Licensure Survey. Survey dates: February 23, 24, 25, 26, and 29, 2016 Facility number: 000470 Provider number: 155600 AIM number: 100289210 Census bed type: SNF: 17 SNF/NF: 102 Residential: 4 Total: 123 Census payor type: Medicare: 12 Medicaid: 83 Other: 24 Total: 119 This deficiency reflects State findings cited in accordance with 410 IAC 16.2-3.1. Quality Review was completed by 21662 on March 1, 2016.	F 0000	Mulberry Health & RetirementCommunity respectfully request a desk review in lieu of an onsite follow upsurvey	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

Any defiencystatement ending with an asterisk (*) denotes a deficency which the institution may be excused from correcting providing it is determined that other safegaurds 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	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 record review, observation and interview, the facility failed to ensure food was labeled and dated when opened in 1 of 1 kitchens in the facility. This deficient practice had the potential to affect 119 of 119 residents who received food from the kitchen. Findings include: During the kitchen tour on 2/23/16 at 8:40 a.m., the following observations were made: 1.) The refrigerator and freezer was observed with the following items: a. 6 packages of frozen English muffins without a date received b. 9 frozen chicken breasts in a Ziploc bag without a date received or opened c. a container of buttermilk ranch dressing with no open date d. a jar of banana pepper rings with no open date	F 0371	Corrective action taken by the Dietician at the time theitems were identified to not have an opened date on them, even though they werenot expired, was to remove the items from their respective storage areas of thekitchen. No resident had the potential to be negatively affected bythe alleged deficient practice as none of the items identified in the surveywere actually expired. Dietary staff will be in-serviced on the facilities policyof dating all items when they are opened. Dietician will be responsible formonitoring opened items in the kitchen to ensure they are dated when opened. ACQI audit tool will be completed weekly for the first 30 days and monthly forthe next quarter to ensure compliance. Dietician will report to the facilitiesQuality Assurance committee on results of the audits and any actions necessaryto ensure 100% compliance.	03/30/2016

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155600	(X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING	(X3) DATE SURVEY COMPLETED 02/29/2016
NAME OF PROVIDER OR SUPPLIER MULBERRY HEALTH & REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 502 W JACKSON ST MULBERRY, IN 46058	

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	2.) The dry storage area was observed to have the following items: a. a bottle of soy sauce with no open date b. a bottle of teriyaki sauce with no open date c. a bottle of syrup with no open date d. a bottle of molasses with no open date e. 2 bottles of apple cider vinegar with no open date f. a bottle of white vinegar with no open date g. a bottle of marsala with no open date h. a bottle of almond extract flavoring with no open date i. a bottle of lemon extract flavoring with no open date j. a bottle of vanilla extract flavoring with no open date During an interview with the Dietician on 2/23/16 at 8:45 a.m., she indicated all items should be labeled with an open date and a use by date. During on interview with the Executive Director on 2/29/16 at 11:00 a.m., he indicated all items should be dated when opened. Review of facility policy untitled, not dated, received from the Executive Director on 2/29/16 at 9:30 a.m., indicated "...7. All foods will be covered, labeled, and dated...."			

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	3.1-21(i)(2)			
R 0000 Bldg. 00	This visit was for a State Residential Licensure Survey. Residential Census: 4 Sample: 6 This State finding is cited in accordance with 410 IAC 16.2-5.	R 0000	Mulberry Health & RetirementCommunity respectfully request a desk review in lieu of an onsite follow upsurvey	
R 0273 Bldg. 00	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. Based on record review, observation and interview, the facility failed to ensure food was labeled and dated when opened in 1 of 1 kitchens in the facility. This deficient practice had the potential to	R 0273	Corrective action taken by the Dietician at the time theitems were identified to not have an opened date on them, even though they werenot expired, was to remove the items from their respective storage	03/30/2016

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	affect 4 of 4 residents who received food from the kitchen. Findings include: During the kitchen tour on 2/23/16 at 8:40 a.m., the following observations were made: 1.) The refrigerator and freezer was observed with the following items: a. 6 packages of frozen english muffins without a date received b. 9 frozen chicken breasts in a Ziploc bag without a date received or opened c. a container of buttermilk ranch dressing with no open date d. a jar of banana pepper rings with no open date 2.) The dry storage area was observed to have the following items: a. a bottle of soy sauce with no open date b. a bottle of teriyaki sauce with no open date c. a bottle of syrup with no open date d. a bottle of molasses with no open date e. 2 bottles of apple cider vinegar with no open date f. a bottle of white vinegar with no open date g. a bottle of marsala with no open date h. a bottle of almond extract flavoring with no open date		areas of thekitchen. No resident had the potential to be negatively affected bythe alleged deficient practice as none of the items identified in the surveywere actually expired. Dietary staff will be in-serviced on the facilities policyof dating all items when they are opened. Dietician will be responsible formonitoring opened items in the kitchen to ensure they are dated when opened. ACQI audit tool will be completed weekly for the first 30 days and monthly forthe next quarter to ensure compliance. Dietician will report to the facilitiesQuality Assurance committee on results of the audits and any actions necessaryto ensure 100% compliance.	

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	i. a bottle of lemon extract flavoring with no open date j. a bottle of vanilla extract flavoring with no open date During an interview with the Dietician on 2/23/16 at 8:45 a.m., she indicated all items should be labeled with an open date and a used by date. During on interview with the Executive Director on 2/29/16 at 11:00 a.m., he indicated all items should be dated when opened. Review of facility policy untitled, not dated, received from the Executive Director on 2/29/16 at 9:30 a.m., indicated "...7. All foods will be covered, labeled, and dated...."			