

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155673	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 05/24/2013
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NAME OF PROVIDER OR SUPPLIER MARKLE HEALTH & REHABILITATION	STREET ADDRESS, CITY, STATE, ZIP CODE 170 N TRACY ST MARKLE, IN 46770
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F000000	<p>This visit was for a Recertification and State Licensure Survey.</p> <p>Survey dates: May 20,21, 22, 23, and 24, 2013</p> <p>Facility number: 000544 Provider number: 155673 AIM number: 100267340</p> <p>Survey Team: Julie Call, RN, TC Angela Strass, RN Virginia Terveer, RN Sue Brooker, RD (May 20, 21, 22, 2013)</p> <p>Census bed type: SNF/NF: 68 Total: 68</p> <p>Census payor type: Medicare: 4 Medicaid: 50 Other: 14 Total: 68</p> <p>These deficiencies reflect state findings cited in accordance with 410 IAC 16.2.</p> <p>Quality review completed on May 24, 2013 by Randy Fry RN.</p>	F000000	F000Credible Allegation of Compliance & Request for Paper Compliance .The creation & submission of thisplan of correction does not constitutean admission by this provider of anyconclusion set forth in the statement ofdeficiencies, or of any violation of regulation.This provider respectfully requests that the2567 plan of correction be considered theletter of credible allegation & requests a desk review certificationof compliance.	
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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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F000364 SS=E	<p>483.35(d)(1)-(2) NUTRITIVE VALUE/APPEAR, PALATABLE/PREFER TEMP Each resident receives and the facility provides food prepared by methods that conserve nutritive value, flavor, and appearance; and food that is palatable, attractive, and at the proper temperature.</p> <p>Based on observation, interview and record review the facility failed to ensure cold beverages were served at the appropriate temperature in the Auguste's Cottage potentially affecting 24 of 24 residents who ate their meals in the Auguste's Cottage dining room.</p> <p>Findings include:</p> <p>1. During an observation of the lunch meal on 5/20/13 at 11:05 a.m. in the Auguste's Cottage, a gallon of white milk, a gallon of chocolate milk, a clear pitcher of orange Kool-aide, and a clear pitcher of lemonade were placed on an open cart in the kitchen area ready for meal service. The temperature of the beverages was not checked prior to service and the beverages were not placed on ice to keep them cold. At 11:10 a.m., the open cart was moved through the Auguste's Cottage dining room delivering beverages of choice to the</p>	F000364	<p>F0364It is the practice of this facility to ensure each resident receives & the facility provides food prepared by methods that conserve nutritive value, flavor, and appearance; and food that is palatable, attractive, and at the proper temperature.I. Corrective Action Taken:Cold beverages & jello are transported to the Auguste's Cottage in a large container that has been filled with ice to ensure beverages/jello are kept cold. Cottage staff are taking the temperature of the cold beverages/jello just prior to meal service. II. How Will Other Residents Be Identified:Cottage staff, activity staff, nursing staff & department heads have been re-educated on taking temps of cold beverages/cold food items just prior to serving & on placing cold beverages/cold food items such as jello on ice when transporting from the dietary department. Re-education was completed by 6-14-13.III. Measures Put In Place:Dietary staff will fill a large pan/container with ice & set the filled pitchers of cold beverages/cold food items inside the ice filled pan/container. Items will then be</p>	06/14/2013	

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	<p>residents. Beverages continued to be offered throughout the meal service. The gallons of milk and the pitchers of beverages remained on the open cart throughout the entire lunch meal until they were returned to the refrigerator in the Auguste's Cottage kitchen at 12:20 p.m. They were never placed on ice. A large sheet pan containing individual bowls of Jello was also observed on the counter in the kitchen area for meal service. The bowls of Jello were not placed on ice to keep them cold.</p> <p>Activities Assistant #1 was interviewed on 5/21/13 at 11:50 a.m. During the interview she indicated the gallons of milk and the pitchers of juice and other beverages were kept in the refrigerator in the kitchen area of Auguste's Cottage. She also indicated they were brought out from the refrigerator and placed on the open cart for each meal service.</p> <p>2. During an observation of the lunch meal on 5/21/13 at 10:55 a.m. in the Auguste's Cottage, a gallon of white milk, a gallon of chocolate milk, a clear pitcher of cranberry juice, a clear pitcher of orange Kool-aid, and a clear pitcher lemonade were placed on an open cart in the kitchen area ready for meal service. The</p>		<p>transported to the Auguste's Cottage & left on ice until they are served. Dietary will transport these items within 15 minutes of scheduled meal time. Cottage staff will take the temps of the cold beverages/jello at the time of service & record the temps on a temperature log. Memory Care Facilitator and/or Cottage Nurse/designee will visually monitor compliance while assisting during the meal service to ensure food is transported on ice for all meals & temp logs will be reviewed.IV. How Will The Corrective Action Be Monitored:To ensure compliance, a member of the IDT team/designee is responsible for completion of the "Safe Food Handling" CQI tool twice daily x 4 weeks, then once daily x 4 weeks, and then quarterly until continued compliance is maintained for 2 consecutive quarters. The results of these audits will be reviewed by the CQI committee overseen by the Administrator. If threshold of 95% is not achieved, an action plan will be developed to ensure compliance. Completion Date: 6/14/13</p>				

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	<p>temperature of the beverages was not checked prior to service and the beverages were not placed on ice to keep them cold. At 11:05 a.m., the open cart was moved through the Auguste's Cottage dining room delivering beverages of choice to the residents. Beverages continued to be offered throughout the meal service. The gallons of milk and the pitchers of beverages remained on the open cart through 12:00 p.m. They were never placed on ice.</p> <p>The Certified Dietary Manager (CDM) was interviewed on 5/22/13 at 1:10 p.m. During the interview she indicated the temperature of the cold beverages, especially the milk, should be taken prior to meal service. She also indicated all cold food should be kept on ice to maintain the appropriate temperature.</p> <p>A current facility policy "Food Temperatures", dated April, 2011 and provided by the CDM on 5/22/13 at 2:40 p.m., indicated "...The facility will prepare and serve food at the proper temperature to prevent food borne illness...foods that are potentially hazardous...cold foods at or below 41 (degrees) F (Fahrenheit)...Temperatures should be taken at the beginning of meal</p>						

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	<p>service and periodically during meal service to ensure...cold food stay below 41 (degrees) F during the portioning, transporting, and serving process...."</p> <p>3.1-21(a)(2)</p>			

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F000371 SS=E	<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</p> <p>Based on observation, interview and record review, the facility failed to transport room meal trays safely through the hallways for 17 of 17 residents who received meal trays in their room.</p> <p>1. During an observation of the lunch meal on 5-20-2013 from 11:39 a.m. through 12:00 p.m., Certified Nursing Assistant (CNA) #2 parked the food cart in the 300 hall between rooms 304 and 306. CNA #2 carried the room trays to the residents down the hallway with the cart food left in one place to the following rooms: 302- with the glass of juice and bowl of jello not covered. 303- with the glass of lemonade and bowl of jello not covered. 304- with the glass of iced tea and bowl of jello not covered. 311- with the glass of milk, glass of</p>	F000371	<p>F0371It is the practice of this facility to ensure the facility procures food from sources approved or considered satisfactory by Federal, State or local authorities and that the facility stores, prepares, distributes, and serves food under sanitary conditions.I. Corrective Action Taken:All food items on resident room trays are covered by dietary personnel when placed inside the closed food cart prior to transporting to resident rooms.C.N.A.'s are moving the food cart from room to room when delivering the meal trays to resident rooms.II. How Will Other Residents Be Identified:Dietary staff, nursing staff, activities staff, and department managers have been re-educated on moving the food cart from room to room when delivering meal trays to resident rooms.Dietary staff has been re-educated on covering all foods that are placed inside the meal delivery carts. Re-education was completed by 6-14-13.III. Measures Put In Place:When placing food items inside the enclosed meal delivery carts, dietary personnel will place</p>	06/14/2013			

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	<p>iced tea and bowl of jello not covered. 313 - with the bowl of jello not covered. 316 - with the glass of lemonade and bowl of jello not covered. 309 - with the glass of lemonade, glass of chocolate milk and bowl of jello not covered.</p> <p>The cart was moved by CNA #2 to the 200 hall and parked between rooms 202 and 204. CNA #2 carried the following room trays down the hallway with the food cart left in one place, to the following rooms: 201-1 - with the glass of milk, glass of juice and jello not covered. 201-2 - with the glass of milk and bowl of jello not covered.</p> <p>The cart was moved by CNA #2 and parked between rooms 206 and 208. CNA #2 carried the following room trays down the hallway with the food cart left in one place, to the following rooms: 208 - with the glass of milk, glass of lemonade and bowl of jello not covered. 210 - with the glass of milk, glass of lemonade and glass of ice cream not covered. 214 - with the glass of juice and bowl of jello not covered.</p>		<p>a lid or plastic wrap on each uncovered item, such as a bowl of food and/or beverage. Dietary manager and/or cook will ensure nothing leaves the kitchen uncovered by visually checking the items after they are placed inside the cart & just prior to sending out to the halls. This will be visually checked each meal & recorded on a log & reviewed by facility dietician during her routine visits to facility. When the meal cart arrives on the hall, the C.N.A. will push the enclosed meal cart from room to room while delivering meals to those residents who are dining in their room. IV. Monitoring of Corrective Action: To ensure compliance, a member of the IDT team/designee is responsible for completion of the "Safe Food Handling" CQI tool twice daily x 4 weeks, then once daily x 4 weeks, and then quarterly until continued compliance is maintained for 2 consecutive quarters. The results of these audits will be reviewed the the CQI committee overseen by the Administrator. If threshold of 95% is not achieved, an action plan will be developed to ensure compliance. Completion Date: 6-14-13</p>				

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	<p>2. During an observation of lunch meal on 5-21-2013 at 11:52 a.m., CNA #2 parked the food cart in the 200 hall between rooms 202 and 204. CNA #2 carried the following room trays down the hallway to the following rooms: 201-2 - a bowl of fruit and a bowl of salad were not covered. 200-2 - a bowl of fruit and a bowl of salad were not covered. 208 - a bowl of fruit and a bowl of salad were not covered.</p> <p>3. During an observation of lunch meal on 5-21-2013 at 12:00 p.m., CNA #3 carried the following room trays down the hallway from the food cart which was parked between rooms 202 and 204, to the following rooms: 210-1 a bowl of fruit and a bowl of salad were not covered. 214-2 a bowl of carrots and a bowl of salad were not covered.</p> <p>An interview with the Certified Dietary Manager (CDM) on 5-22-2013 at 2:10 p.m., indicated all the food and drinks on the room trays should be covered and the food cart should be parked outside each room as the room tray was delivered.</p> <p>A General Food Preparation and</p>						

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	<p>Handling policy dated 04/2011 provided by the CDM on 5-22-2013 at 2:35 p.m., indicated "...prepared food will be transported to other areas either covered or in covered containers/enclosed carts..."</p> <p>3.1-21(i)(3)</p>				