

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155658	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	X3) DATE SURVEY COMPLETED 02/05/2016
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NAME OF PROVIDER OR SUPPLIER WESLEY MANOR HEALTH CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1555 N MAIN ST FRANKFORT, IN 46041
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R 0000 Bldg. 00	<p>This visit was for the Investigation of Complaint IN00189028.</p> <p>Complaint IN00189028-Substantiated. State deficiencies related to the allegations were cited at R270 and R273.</p> <p>Survey date: February 4 and 5, 2016</p> <p>Facility number: 001152 Provider number: 155658 AIM number: 200221050</p> <p>Census bed type: Residential: 129 Total: 129</p> <p>Sample: 5</p> <p>These deficiencies reflect state findings cited in accordance with 410 IAC 16.2-5.</p> <p>Quality Review was completed on February 9, 2016.</p>	R 0000	<p>Wesley Manor Retirement Community is committed to providing high quality services to its residents and considers itself to be a partner with State and Federal regulatory agencies in order to continually improve care. We accept any and all feedback as an opportunity to look inward and to engage in continuous quality improvement activities. Although we acknowledge the cited tags and submit the required plan of correction, the listed corrections shall not be construed as an admission that Wesley Manor provides anything other than high quality services to our residents. The survey process is one of many means to assure quality of care and services and compliance with State and Federal regulations. As required, the facility submits the following plan of correction.</p>	
R 0270 Bldg. 00	<p>410 IAC 16.2-5-5.1(c)(1-3) Food and Nutritional Services - Deficiency (c) The facility must meet: (1) daily dietary requirements and requests,</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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	<p>with consideration of food allergies; (2) reasonable religious, ethnic, and personal preferences; and (3) the temporary need for meals delivered to the resident ' s room.</p> <p>Based on observation, interview and record review, the facility failed to ensure 1 of 4 residents were receiving the appropriate therapeutic diet ordered by her Physician and 1 of 1 residents were receiving appropriate education on the prescribed therapeutic diet to enable her to make wise diet menu choices for residents being reviewed to ensure therapeutic diets were being followed as ordered and meeting her dietary requirements. (Resident C)</p> <p>Findings include:</p> <p>A current document titled "Resident Summary Report" dated 2/4/16, provided by Dietary Supervisor #3 on 2/4/16 at 10:50 a.m., indicated Resident C's diet was to be a Consistent Carbohydrate regular textured diet.</p> <p>A current document titled "Fall Winter 2015 with Diet Spreads Edit, Days 1-7" provided by Dietary Supervisor #3 on 2/4/16 at 10:50 a.m., indicated a resident was not to have these foods on a Simplified Renal diet: Navy bean soup Rosemary Roasted Potatoes</p>	R 0270	<p>This tag was cited due to Resident C not receiving thecorrectly prescribed diet and thus not receiving education on the correct dietin order to make informed consent choices regarding whether she desired tofollow the prescribed diet. In order to correct this problem for Resident C, thefacility has updated the Dining Services records for this resident with allcurrent orders regarding her diet. Sheis currently receiving a low potassium diet. However, it should be known that Resident C has a consistent history ofdesiring to waive her prescribed diet. In order to make certain the resident's right to make informed consentdecisions regarding her diet choices are acknowledged, the facility will (1)Provide education, both orally and in writing, to Resident C regarding herprescribed diet, (2) Document the resident's decisions regarding her diet, and(3) Update her service plan and menus to reflect her desires. In order to identify any other residents who might beimpacted by this problem, the facility will audit prescribed diets for allresidents (Attachment A) who have specialized diets, and make certain that the most recent order in the medicalrecord</p>	03/01/2016	

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	<p>Iced Tea Milk</p> <p>The Resident C was served these foods off the Simplified Renal diet list: Navy bean soup Iced tea Milk</p> <p>During an interview on 2/4/16 at 11:38 a.m., Resident C indicated she was a diabetic and had kidney disease at Stage III. She indicated she had to have a special diet due to those diagnoses. She indicated the last company that ran the kitchen gave her a consistent carbohydrate diet and the company that ran the kitchen now did not do that. She indicated the new company gave her a diet based on a number of carbohydrates. She indicated a Registered Dietician (RD) came and educated her on the high carbohydrate diet she was supposed to be receiving here, but her kidney doctor said she cannot have a high carbohydrate diet. She indicated she gave the Chef a paper from her kidney doctor, which said she had to have a low carbohydrate, but no one paid any attention to the paper she gave them from her doctor. She indicated the new company did not take individual diets into consideration for residents. She indicated she did not get the food she asked for on her tray a lot of</p>		<p>matches the records used by Dining Services (Tray cards, menus, etc...) In order to prevent this problem from occurring again, the facility has developed an electronic Diet Requisition (Attachment B) to provide more efficient and thorough communication between the Nursing and Dining Services departments. The requisition is filled out by Nursing at the time the order is received is sent as an attachment via email to a group email distribution including the Director of Nursing, Unit Managers, 3 Dining Services Supervisors, the RD, and the Speech Pathologist. Nursing and Dining Services staff will receive education regarding the new Diet Requisition and the policy and procedure for the Diet Requisition process (Attachment C) In order to monitor the effectiveness of these systemic changes, the facility will repeat the audit mentioned above (Attachment A) quarterly for the period of 1 year. All corrections for this tag will be completed by March 1, 2016.</p>		

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	<p>the time.</p> <p>On 2/4/16 at 12:15 p.m., Resident C was observed in the Schierer dining room eating her lunch. She received her lunch at that time. She had a hamburger on a bun, Navy bean soup, a glass of water, a glass of skim milk and a glass of iced tea on her lunch tray. The resident's "Thursday Dinner" menu ticket indicated she was to have a regular texture, consistent Carbohydrate diet with a fluid restriction of 2000 milliliters/day with no fluids on her tray and five Carbohydrate choices. She indicated she had circled on her meal ticket to receive for lunch Italian Flat Beans, Navy bean soup and a Hamburger on a bun. She indicated she chose iced tea and skim milk as her fluids to drink. She indicated she had wrote in cornbread and fruited jello. She did not receive the cornbread, fruited jello or the Italian flat beans on her tray. She indicated at that time she was taken off the of the fluid restriction six months ago, but her diet menu had not been updated.</p> <p>On 2/5/16 at 9:55 a.m., the Director of Nursing provided four email documentations and indicated these were emails, which showed Resident C had been educated regarding her diet by the RD. An email dated 12/17/15 at 12:42</p>			

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	<p>p.m., indicated the RD and new Chef talked to Resident C about her dietary concerns and provided education regarding her diet. An email dated 1/22/16 at 2:04 p.m., indicated Resident C informed the Case Manager for Area 5 during her visit on 1/13/16, she was supposed to be receiving diabetic diet meals. An email dated 1/22/16 at 5:21 p.m., from the Executive Director indicated Resident C was on a carb controlled diet, which was a little different than the no concentration sweets diet that she was used to. He indicated the RD had met with Resident C and discussed that diet with her and she had voiced understanding at that time. He indicated he could have the RD meet with her again. An email dated 1/29/16 at 8:26 a.m., indicated an RD provided education to Resident C regarding her diet to manage her diabetes and CKD (chronic kidney disease). The Director of Nursing provided a "Snack Menu" and indicated this was the snack list the RD and Resident C developed for her to have as snacks every night.</p> <p>The document titled "[Name of Resident] Snack Menu" undated, provided by the Director of Nursing on 2/5/16 at 9:55 a.m., indicated "To Receive At Supper, She Is A Diabetic And Needs A Snack At Night:</p>			

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	<p>Monday: Cottage Cheese and peaches. Tuesday: Roast beef sandwich on wheat bread. Wednesday: Turkey Mw (with)/tomato and mayo on wheat. Thursday: Cottage Cheese and peaches. Friday: Sliced tomatoes and mayo. Saturday: Turkey sandwich on wheat. Sunday: Bowl of cherry tomatoes.</p> <p>Please make all of these selections a nice portion. "Never give ham or peanut butter or jelly."</p> <p>During an interview on 2/5/16 at 11:12 a.m. the Dietary Director indicated she and the Executive Chef met with Resident C regarding her diet. She indicated the resident voiced understanding she was on a carbohydrate controlled diet. The Executive Chef indicated Resident C signed a waiver for her diet and she signed one every time she came back from the doctor because she was non-compliant with following her diet.</p> <p>A current document titled "Therapeutic Diet Waiver" dated 10/19/15, provided by Dietary Supervisor #2 on 2/5/16 at 11:12 a.m., indicated "Your physician has prescribed a therapeutic diet in order to meet your medical needs. [Name of</p>			

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	<p>facility] encourages all residents to follow their prescribed diets as this is recommended for the overall improvement and/or maintenance of their health condition. The facility has provided you with education both verbally and in writing in order to assist you to make an informed decision regarding the diet you have been prescribed. You have been presented with this liability waiver because you have chosen to follow a diet plan other than what was prescribed for you. You have been informed, both orally and in writing , of the potential negative outcomes associated with not following the diet that you have been prescribed. I accept full responsibility for not following my prescribe diet and will not hold [Name of facility] or its staff responsible for any negative impact that this might have on my health, safety or wellbeing." This document was signed by Resident C on 10/19/15.</p> <p>A current document titled "Diet Requisition" dated 1/6/15, was provided by Dietary Supervisor #2 on 2/5/16 at 11:12 a.m., indicated Resident C's diet order was 1800 calorie and increased potassium diet.</p> <p>Resident C's record was reviewed on 2/5/16 at 11:25 a.m. Diagnoses included,</p>			

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	<p>but were not limited to, diabetes mellitus type II and chronic kidney disease.</p> <p>A Physician's order was written on 10/21/15, for a 2000 calorie diet.</p> <p>A Physician's order was written on 11/16/15, for a low potassium diet.</p> <p>During an interview on 2/5/16 at 12:00 p.m., the Second Floor Unit Manager with the Dietary Director and Dietary Supervisor #2 in attendance indicated Resident C was on a low potassium diet. The Dietary Supervisor #2 indicated Resident C was on a Carbohydrate diet not a low potassium diet. The Dietary Supervisor #2 indicated the Diet Requisition dated 1/6/15, was the last diet requisition dietary had received from the Nursing staff regarding a diet change for Resident C. She indicated Resident C had not been educated on a low potassium diet because the Dietary department did not know she was on that diet because there had been a miscommunication between the Dietary and Nursing departments, so Dietary did not know the correct diet for Resident C.</p> <p>During an interview on 2/5/16 at 12:45 p.m., the Executive Chef indicated if a food item was circled on a resident's menu that indicated the resident had</p>			

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	<p>selected that item as a menu choice selection for that meal. He indicated the residents should receive the circled menu choices on their meal tray. He indicated the kitchen did not make cornbread and the kitchen did not always have the fruited jello to place on the resident's tray when they write it in as a selection.</p> <p>During an interview on 2/5/16 at 1:00 p.m., the Registered Dietician Consultant indicated Resident C was placed on a 2000 calorie diet from the Emergency Room on 10/9/15, and the low potassium diet order was written on 11/16/15. She indicated the low potassium diet order should have been added to the 2000 calorie diet order. She indicated Resident C's diets needed clarified.</p> <p>During an interview on 2/5/16 at 3:45 p.m., Resident C indicated she was given education from a lady about her diabetic diet. She indicated she had told her how to choose her foods based on carbohydrates. Resident C indicated she had told this lady her renal doctor did not want her on a high carbohydrate diet. She indicated she was also on a renal diet, which she knew she could not have a lot of phosphorus and sodium, but she was not educated on a low potassium diet. She indicated the only food she knew was high in potassium was</p>			

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R 0273 Bldg. 00	<p>bananas.</p> <p>This Residential tag relates to complaint IN189028.</p> <p>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.</p> <p>Based on observation, interview and record review, the facility failed to ensure thermometer probes were sanitized prior to the temperature-taking procedure being completed and food was served following the temperature-taking procedures in 1 of 2 kitchens. This deficient practice had the potential to affect 129 of 129 residents receiving food from the kitchen.</p> <p>Findings include:</p> <p>1. On 2/5/16 at 10:55 a.m., Cook #1 was observed bringing an analog thermometer to the steam table from the back of the kitchen and placed it into the Beef Stroganoff sauce. When he placed the</p>	R 0273	<p>This tag was cited due to the surveyor's observation that thermometers used to take the temperature of foods prior to serving were not consistently sanitized between food items.</p> <p>There are no specific residents mentioned as part of this tag. Corrections for this tag will correct the problem for all residents.</p> <p>All staff in the Dining Services Department will receive education regarding the procedures (Attachment D) for sanitizing the thermometers when taking food temperatures before each food item being tested. Probe wipes are routinely provided in the facility's kitchen. Education to the staff will include the risks associated with not</p>	03/01/2016

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	<p>thermometer in the sauce a probe wipe package, torn in half fell out of his hand onto the ledge of the steam table. There was no thermometer sanitization procedure observed prior to the temperature of the sauce. After placing the analog thermometer into the Stroganoff sauce Cook #1 indicated the thermometer was not calibrated and he needed another thermometer. Dietary Supervisor #2 brought a digital thermometer from the back of the kitchen and placed it into the Stroganoff sauce to obtain the temperature.</p> <p>2. Dietary Supervisor #2 used a white cloth with food debris laying on the white ledge of the steam table and wiped the digital thermometer on the white cloth, then turned it over and wiped it again. She placed the digital thermometer into the Lemon Pepper Chicken and obtained the temperature of the Chicken. The temperature of the chicken was 140 degrees Fahrenheit. She indicated to Cook #1 to place the chicken back in the oven.</p> <p>3. On 2/5/16 at 11:00 a.m., Cook #1 poured Egg Noodles into a colander, then into a pan on the steam table. He went to the back of the kitchen and brought up a digital thermometer attached to a box by a red cord. He stuck the digital</p>		<p>following the sanitization procedures.</p> <p>To monitor the staff's compliance with the approved procedure, the Executive Chef will document observations of each staff member who is assigned the task of taking food temperatures in order to confirm they are following the procedures correctly (Attachment E).</p> <p>These audits will be completed on selected staff members at least monthly on an on-going basis as part of the facility's normal sanitation audits performed in the kitchen.</p> <p>All corrections for this tag will be completed by March 1, 2016.</p>		

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	<p>thermometer into the Egg Noodles without sanitizing the thermometer, then laid the box and the thermometer on the white ledge of the steam table. He went to get another pan of Egg Noodles, which another staff member had poured into a pan. As he was obtaining that pan of noodles, the digital thermometer on the cord fell down between the steam table ledge and the sink next to the steam table and was hanging by the red cord. Cook #1 used the digital thermometer, which was hanging down to take the temperature of the other pan of Egg Noodles. He indicated the digital thermometer was not working properly and he needed a new thermometer. He placed the pan of noodles on the counter and another staff member took care of the noodles.</p> <p>4. On 2/5/16 at 11:02 a.m., Cook #1 was given an analog thermometer and he took the temperature of the brown gravy without sanitizing the thermometer.</p> <p>5. On 2/5/16 at 11:04 a.m., Dietary Supervisor #2 brought a digital thermometer from the back of the kitchen and placed the thermometer into the chicken in the oven. She checked the temperature of the Lemon Pepper Chicken without sanitizing the thermometer.</p>			

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	<p>6. On 2/5/16 at 12:03 p.m., a food tray had Beef Stroganoff, cottage cheese with 2 pears, corn and cherry cobbler. A digital thermometer was already in the Beef Stroganoff when the tray was first observed. Dietary Supervisor #2 was observed removing the thermometer and placing it under running water and drying it with a brown paper towel, then she placed it into the cottage cheese. She removed the thermometer from the cottage cheese. She was observed placing it under running water and dried it with a brown paper towel, then placed it in the corn. She was observed removing the thermometer from the corn, placed it under running water and drying it with a brown paper towel.</p> <p>During an interview on 2/5/16 at 12:15 p.m., Dietary Supervisor #2 indicated probe wipes were used every time the thermometer required sanitizing except during the food quality test tray when she took the temperature of the food. She indicated during that time, she used running water to wash the thermometer and a paper towel to dry the thermometer. The Executive Chef at that time indicated probe wipes should have been used every time before, during and after the temperatures of the food were taken.</p>			

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	<p>A document titled "Thermo-San Thermometer Probe Wipes: FAQs/2015" undated, provided by the Executive Chef on 2/5/16 at 1:06 p.m., indicated "What is the intended use for disposable probe wipes? To remove food debris from the surface of the thermometer probe when taking temperatures of ready-to-eat foods... When should I use disposable 'probe wipes'? While checking temperatures of ready-to-eat foods... What product should I use? A probe wipe saturated with 'quat' sanitizer, such as the Thermo-San Food Contact Surface Wipe. What is the recommended procedure for using disposable probe wipes? A. To sanitize the food contact surface of the thermometer probe: Clean the food contact surface of the thermometer probe with soapy water and rinse in clear water. Remove the probe wipe from the canister. Make sure tat the probe wipe is wet... Wipe the entire surface of the thermometer probe until the probe is visible wet for 60 seconds. Allow to air dry. B. To remove food debris from the thermometer probe when taking temperatures of ready-to-eat foods: Insert thermometer probe into the ready-to-eat food. Obtain the temperature reading. Remove the thermometer probe from the food. Remove the wipe from the canister. Make sure that the wipe is wet... Use the</p>			

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155658	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____		X3) DATE SURVEY COMPLETED 02/05/2016
NAME OF PROVIDER OR SUPPLIER WESLEY MANOR HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1555 N MAIN ST FRANKFORT, IN 46041		
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	<p>wipe to remove any food debris from the probe. Allow the probe to air dry to prevent transfer of the sanitizer to the food. Repeat the process... This is a single-use product and it must be disposed after use...."</p> <p>This Residential tag relates to complaint IN189028.</p>				