

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155587	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 04/29/2013
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NAME OF PROVIDER OR SUPPLIER SUMMERFIELD HEALTH CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 34 S MAIN ST CLOVERDALE, IN 46120
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F000000	<p>This visit was for a Recertification and State Licensure Survey.</p> <p>Survey dates: April 22, 23, 24, 25, 26, and 29, 2013</p> <p>Facility number: 000415 Provider number: 155587 AIM number: 100291250</p> <p>Survey team: Laura Brashear, RN, TC Mary Weyls, RN Teresa Buske, RN</p> <p>Census bed type: SNF/NF: 37 Total: 37</p> <p>Census Payor type: Medicare: 2 Medicaid: 33 Other: 2 Total: 37</p> <p>This deficiency reflects state findings cited in accordance with 410 IAC 16.2.</p> <p>Quality Review completed on 05/01/2013 by Brenda Nunan, RN.</p>	F000000	<p>This plan of correction represents the facility allegation of compliance. The following combined plan of correction of compliance is not an admission to the alleged deficiency and is submitted at the request of the Indiana State Department of Health. Preparation and execution of this response and plan of correction does not constitute an admission or agreement by the provider as the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because the provision of federal and state law requires it. Summerfield Health Care Center submits that it was in substantial compliance with certification requirements at the time of the survey.</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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F000371 SS=F	<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 prepare, distribute, and serve food under sanitary conditions for 2 of 2 kitchen observations in 2 of 2 kitchen areas in that the preparation, service, and distribution areas were observed with accumulation of dried food splatters, dirt, and debris. This had the potential to affect all 37 residents.</p> <p>Findings include:</p> <p>1. During the kitchen observations on 4/22/13 at 10:58 a.m., and 4/26/13 at 11 a.m., the following was observed:</p> <p>a. A heavy accumulation of dried brown and yellow splatters on the ceiling and walls by the stove, food preparation area, and 3 compartment sink area. White splatters were also observed on the metal back splash of the 3 compartment sink.</p> <p>b. A heavy accumulation of debris and dead insects were noted in the</p>	F000371	<p>I. 1.a. The heavy accumulation of dried brown and yellow splatters on the ceiling and walls by the stove, food prep area and 3 compartment sink area and metal back splash have been cleaned. b. The light cover over the stove and 3 compartment sink and dish machine area has been cleaned. c. The wooden cabinet next to the stove has been cleaned. 2.a. The exterior of the wooden cabinet door in the DR has been cleaned. b. The wall next to the steam table has been cleaned. c. The floor and cove base of the kitchen service area has been cleaned with build up around the cove base removed. II. All residents are potentially affected by the alleged deficient practice. III. New cleaning schedules have been written to include daily, weekly and monthly cleaning duties. Each cleaning schedule has an assigned staff member to complete each task. The kitchen staff will be inserviced on all cleaning schedules on 5/16/2013. IV. The CDM will monitor all cleaning schedules(daily, weekly, monthly) 5x/week for 4 weeks then 2x/week thereafter. The</p>	05/29/2013			

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	<p>light cover over the stove, 3 compartment sink, and dish machine areas.</p> <p>c. The doors of the wooden cabinet next to the stove was noted with heavy accumulation of white dried splatters.</p> <p>2. During the kitchen observations of the kitchen service area in the dining room on 4/22/13 at 11:10 a.m., and 4/26/13 at 11:15 a.m., the following was observed:</p> <p>a. The exteriors of the wooden cabinet doors and stove door had dried on white splatters.</p> <p>b. The wall next to the steam table had a heavy accumulation of white dried on splatters.</p> <p>c. The floor in the kitchen service area had debris and a heavy build up at the edges of floor and base coving.</p> <p>Upon interview of the Food Service Supervisor (FSS) on 4/22/13 at 11:05 a.m., the FSS indicated the cabinet doors, stove door, floors, and back splash should be cleaned at least weekly. She also indicated the walls and light covers were cleaned monthly. The FSS indicated the</p>		<p>Dietitian will monitor all cleaning schedules (daily, weekly, monthly) on each scheduled visit. The administrator will monitor all cleaning schedules (daily, weekly, monthly) weekly until substantial compliance has been achieved and substantiated via QA committee. QA committee will monitor until substantial compliance has been achieved.</p>	

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	<p>weekly cleaning had not been completed and the monthly cleaning had not been completed for April.</p> <p>Upon review of the facility's current policy and procedure on 4/29/13 at 3:30 p.m., titled "Dietary Services-Sanitation," and dated April 2006, documentation was noted of "...1. All kitchen, kitchen areas, and dining areas shall be kept clean, free from litter and rubbish, and protected from rodents, roaches, flies and other insects. 2. All utensils, counters, shelves and equipment shall be kept clean, maintained in good repair and shall be free from breaks, corrosions, open seams, and cracks, and chipped areas that may affect their use or proper cleaning. Seals, hinges, and fasteners will be kept in good repair...7. If a sink is used for washing utensils, cooking equipment, or dishes, and also used to wash produce or thaw food, it will be cleaned between uses with approved cleaning and sanitizing agent. 8. Kitchen and dining room surfaces not in contact with food shall be cleaned on a regular schedule and frequently enough to prevent accumulation of grime...."</p> <p>3.1-21(i)(3)</p>			

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