

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155392	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 01/07/2013
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NAME OF PROVIDER OR SUPPLIER HICKORY CREEK AT KENDALLVILLE	STREET ADDRESS, CITY, STATE, ZIP CODE 1433 S MAIN ST KENDALLVILLE, IN 46755
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F0000	<p>This visit was for a Recertification and State Licensure Survey.</p> <p>Survey dates: January 2, 3, 4, 7, 2013</p> <p>Facility number: 000402 Provider number: 155392 AIM Number: 100288120</p> <p>Survey team: Carol Miller RN, TL (January 2, 3, 7, 2013) Diane Nilson RN Rick Blain RN Timothy Long RN</p> <p>Census bed type: SNF/NF: 21 Total: 21</p> <p>Census payor type: Medicare: 1 Medicaid: 19 Other: 1 Total: 21</p> <p>These deficiencies reflect state findings cited in accordance with 410 IAC 16.2.</p> <p>Quality review completed January 8, 2013 by Randy Fry RN.</p>	F0000		
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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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F0371 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 ensure food was protected from potential contamination while being transported to the dining room during 2 of 2 meal observations, potentially affecting 17 of 17 residents eating in the dining room on 1/2/13 and 16 of 16 residents eating in the dining room on 1/3/13. The facility also failed to ensure thermometers in 1 of 1 kitchen refrigerator registered accurate temperatures. The facility further failed to ensure the test strips for testing sanitizing solution for cleaning counter tops were working correctly.</p> <p>Findings include:</p> <p>1. During the kitchen tour accompanied by the Dietary Manager, at 9:40 a.m., on 1/2/13, 2 thermometers were noted to be placed in the only refrigerator in the kitchen. Both of the thermometers registered 15 degrees Fahrenheit (F).</p>	F0371	<p>Provider # 15-5392 Facility # 000402 Attached for your review and approval is the completed form 2567L Statement of Deficiencies and Plan of Correction for the recent Recertification & State Licensure Survey conducted on January 2 - 7, 2013, at Hickory Creek at Kendallville, Kendallville, IN. Submission of this Plan of Correction is not an admission that a deficiency exists. This Plan of Correction is submitted to meet requirements established by state and federal law. Please be advised that it is our intent to have this POC also serve as our allegation of compliance for the deficiency cited. Compliance is effective on January 15, 2013. We respectfully request a desk review/paper compliance for the Plan of Correction. It is the standard and policy of this facility to store, prepare, distribute and serve food in a sanitary manner, including the monitoring and accurate recording of refrigerator temperatures. All dietary employees were inserviced on Monday, Jan 7, 2013, by the Dietary Manager in regards to the</p>	01/15/2013	

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	<p>The Dietary Manager reviewed the refrigerator temperature logs for January 2013, and although the temperature had not been recorded for 1/2/2013, she indicated the temperature on 1/1/2013 registered 32 degrees F. The Dietary Manager indicated she reviewed the logs for December 2012, and they all registered 32 degrees F. The Dietary Manager indicated the refrigerator temperatures were normally taken at the beginning of each shift.</p> <p>The Dietary Manager then was noted to check another food thermometer by placing it in ice water, and the thermometer was noted to register 32 degrees F. She then placed the thermometer in the refrigerator to get a reading. After waiting for approximately 20 minutes, The thermometer registered 28 degrees F. At 12 noon on 1/2/13, the Dietary Manager indicated a new thermometer had been placed in the refrigerator. The thermometer was checked and registered 37 degrees F.</p> <p>The Refrigerator/Freezer Temperature logs for December 2012, and January 2013 were reviewed, at 10:50 a.m., on 1/3/13, and indicated the temperatures which were checked in the morning and in the evening registered 32 degrees.</p>		<p>correct way to read a thermometer and accurately record the temperature. The Dietary Manager will inspect and review the recorded temps for accuracy 5 times a week for 4 weeks; then 3 times a week for 4 weeks; then weekly for 4 weeks and then randomly. Results of this audit will be presented for review by the Quality Assurance Committee which meets monthly and is overseen by the Administrator. When 100% compliance is attained, further audits will be completed as recommended by the Quality Assurance Committee. It is the standard and policy of this facility to store, prepare, distribute, and serve food in a sanitary manner including testing and accurately recording the results as seen on the sanitizer test strips. Appropriate disinfectants shall be used and tested according to the manufacturer's directions on the test strip bottle and then accurately recorded to assure the mixture is within the correct parameters. All dietary employees were inserviced on Jan 7, 2013, by the Dietary Manager in regards to testing the sanitizing solution and reading the test strip results to ensure the solution is within the parameters and accurately recording those results. The Dietary Manager will inspect and review the recorded results for completion and accuracy 5 times</p>		

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	<p>The temperature logs for January 2013 indicated the temperatures were checked in the morning and evening on 1/2/13 and registered 32 degrees Fahrenheit (F), and also registered 32 degrees F on the morning of 1/3/13.</p> <p>The Dietary Manager was interviewed, at 1:23 p.m., on 1/7/13, and indicated the refrigerator temperatures had been registering around 37 degrees Fahrenheit (F) since the new thermometer had been placed on 1/2/13. She indicated she did not adjust the refrigerator temperatures after discovering the previous thermometers were not accurate.</p> <p>Review of the Receiving and Storage-Refrigeration Policy, provided by the Dietary Manager on 1/3/13, indicated, "As a variety of foods are stored under refrigeration, it is essential that refrigerator temperatures be low enough to safely keep the most perishable foods. Refrigerator temperatures that are consistently 38 degrees F or below will provide a safe margin."</p> <p>2. The sanitizer solution for food contact surfaces was checked at 10:15 a.m., on 1/3/13 by the Dietary</p>		<p>a week for 4 weeks; then 3 times a week for 4 weeks, the weekly for 4 weeks and then randomly. Results of this audit will be presented for review by the Quality Assurance committee which meets monthly and is overseen by the Administrator. When 100% compliance is attained, further monitoring will be completed as recommended by the Quality Assurance committee. It is the standard and policy of this facility to store, prepare, distribute, and serve food in a sanitary manner including the appropriate manner of covering all food that is being transported to the resident. An inservice was given by the Dietary Manager on Jan 7, 2013, to re-educate the appropriate way to cover prepared food for transport to the resident with emphasis on side dishes being covered. The Dietary Manager will monitor and record findings of this process 5 times weekly for 4 weeks; 3 times weekly for 4 weeks; weekly for 4 weeks and then randomly. Results of the audits will be reviewed by the Quality Assurance committee which meets monthly and is overseen by the Administrator. When 100% compliance is attained, further audits will be completed as recommended by the Quality Assurance committee.</p> <p>ADDENDUM : JANUARY 25, 2013 An inervice was given by the Dietary Manager on Jan 7,</p>		

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	<p>Manager using a sanitizer strip taken from a bottle of sanitizer strips. When the Dietary Manager dipped the sanitizer strip in the bucket of solution, the strip registered "0" on the sanitizer strip. The Dietary Manager used a different strip taken from the same bottle and it again registered "0" on the sanitizer strip. The Dietary Manager then emptied the bucket of solution and made a fresh solution placing one of the sanitizer tablets into 4 quarts of water. After the Dietary manager had mixed the new solution, she retested the solution, using the strips from the same bottle, and it again registered "0." She used another strip with the same results, then indicated she would get a new bottle of sanitizer strips and test the solution.</p> <p>At 10:25 a.m., on 1/3/13, the Dietary Manager obtained a new "roll" of sanitizer strips and tested the sanitizer solution and the strip registered 200 parts per million. The Dietary Manager then indicated the sanitizer strips in the bottle were not working and would be discarded. She also indicated the bottle was "pretty full" so had not been opened that long.</p> <p>The day shift cook was interviewed, at 10:20 a.m., on 1/3/13, and indicated</p>		<p>2013, to re-educate the appropriate way to cover prepared food for transport to the resident with emphasis on side dishes being covered. The Dietary Manager and/or Manager on Duty will monitor all three daily meals that are served to ensure compliance with this process and the dietary Manager and/or Manager on Duty will record the findings of this process of all three meals 5 times weekly for 4 weeks; then, (all three meals), 3 times weekly for 4 weeks; then, (all three meals), ongoing weekly for a minimum of 6 months. Results of the audits will be reviewed by the Quality Assurance committee which meets monthly and is overseen by the Administrator. When 100% compliance is attained, further audits will be continued at least weekly by the Dietary Manager and/or Manager on Duty and more often if recommended by the Quality Assurance committee.</p>		

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	<p>she had mixed the solution and tested it with a strip taken from the same bottle of strips the Dietary Manager had used. She indicated she tested the solution at 5:30 a.m., on 1/3/13, and it registered 200 parts per million on the strip.</p> <p>The Sanitizer concentration logs for December 2012, and January 2013, were reviewed at 10:50 a.m., on 1/3/13.</p> <p>The December logs indicated the sanitizer concentration registered 200 parts per million (ppm) when checked daily at breakfast, lunch, and Dinner. The January logs indicated the sanitizer concentration registered 200 ppm when checked at breakfast, lunch, and dinner on 1/1/13, and 1/2/13, and at breakfast on 1/3/13.</p> <p>The Dietary Manager was interviewed, at 1:23 p.m., on 1/7/13, and indicated there was no written policy for the sanitizer concentration solution, however, the acceptable levels per solution were listed on the sanitizer concentration log under chlorine solution was 50-200 PPM (parts per million).</p>						

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	<p>3. On 1/2/13 at 12:15 P.M. staff were observed to transport meal trays from the kitchen and carry them down a short service hall, across the main entrance area of the facility, and then into the dining area. Plates were observed to be covered, but salads and deserts were not covered.</p> <p>On 1/3/13 at 12:10 P.M. staff were observed to transport meal trays from the kitchen and carry them down a short service hall, across the main entrance area of the facility, and then into the dining area. Visitors were observed to enter the building and pass through the entrance area as staff were transporting the meal trays through the area. Plates on the trays were observed to be covered, but salads and deserts were not covered.</p> <p>The Dietary Manager was interviewed on 1/4/13 at 10:30 A.M. During the interview, the Dietary Manager indicated any food transported through the hallways should be covered to avoid possible contamination.</p> <p>An undated facility policy on holding,</p>			

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	<p>transporting and serving food was provided by the Dietary Manager on 1/4/13 at 11:00 A.M., The Dietary Manager indicated the policy was the current facility policy. The policy indicated "Food should be protected from airborne contamination by covering it when unattended and during transport...."</p> <p>3.1-21(i)(2)</p>			