

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 06/28/2012  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  345416	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  06/26/2012
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NAME OF PROVIDER OR SUPPLIER  BERMUDA VILLAGE RETIREMENT CEN	STREET ADDRESS, CITY, STATE, ZIP CODE 142 BERMUDA VILLAGE DR ADVANCE, NC 27006
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(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
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F 323 SS=D	<p>483.25(h) FREE OF ACCIDENT HAZARDS/SUPERVISION/DEVICES</p> <p>The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations, staff interviews and documentation review the facility failed to store poisonous chemicals out of reach of residents on one (1) of one (1) housekeeping cart.</p> <p>The findings are: On 6/26/12 at 1:00 p.m. until 1:15 p.m. a continuous observation was made of a housekeeping cart unattended stored on the main hallway outside the dining room. The housekeeping cart was observed and noted to have 7 (seven) bottles of cleaning agents on top of the cart easily accessible. The seven bottles of cleaning agents were each observed and specified to "keep out of reach of children" and indicated they were "harmful if swallowed."</p> <p>During the continuous observation two (2) residents were noted near the housekeeping cart and no staff member was present. The housekeeping aide was inside the dining room away from view of the cart.</p> <p>On 6/26/12 at 1:15 p.m. the housekeeping aide</p>	F 323	<p>Bermuda Village will ensure that the residents are free from accident hazards as is possible. Poisonous chemicals will be stored out of reach of residents.</p> <p>Cleaning agents that were kept on top of housekeeping cart were removed. Storage unit on housekeeping cart was repaired by maintenance and a locked unit is now available for the housekeeper aid to secure chemicals. A new housekeeping cart with additional storage has been purchased. The Housekeeping Director will review, instruct and inservice aids on training to store hazardous chemicals. The Director of Housekeeping will routinely inspect the housekeeping cart in the Health Center and keep a weekly log. Logs kept on file in housekeeping department 18 months.</p> <p>The nursing staff will be observant of the housekeeping cart and appropriately report to the housekeeping department if the cart is unattended and chemicals are outside of the internal locked cabinet.</p> <p>F323 Addendum: The monitoring of the new housekeeping cart to include proper storage of hazardous chemicals will be performed weekly by the Housekeeping Director or supervisor and recorded on the Housekeeping Cart Log.</p>	7-23-12
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

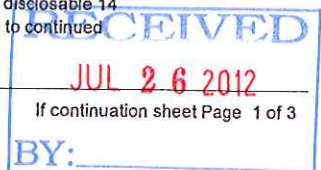
(X6) DATE

*Mary Ellen Foley RN*

*Director of Nursing*

7-24-12

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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F 323	Continued From page 1 walked away from the cart and went down a hallway. She returned at 1:16 p.m. and was interviewed. She reported she was trained to store her cart in a secured space away from residents. She stated that her usual practice was to store chemicals unsecured on top of her cart and utilized the cart's internal locking cabinet for rags. She stated she was aware she should not have left the cart unattended while she cleaned the dining room. She reported she was unable to see the cart from the dining room. She stated she forgot to secure her cleaning cart in a locked room while she cleaned the dining room.  On 6/26/12 at 1:45 p.m. the Director of Housekeeping was interviewed and reported staff members were trained to secure chemicals. She stressed the importance of securing chemicals in the nursing home because of confused and wandering residents. She added that she expected staff to secure all chemicals in the internal cabinet on the cleaning cart. She reported that she did not routinely inspect housekeeping carts to ensure chemicals were stored properly. The Director of Housekeeping also added that she expected housekeepers to keep their carts in sight when cleaning.	F 323	Logs kept on file in housekeeping department for 18 months. However, this practice will continue indefinitely as part of quality assurance. In service meeting for Departmental training was conducted on June 27, 2012 on Chemical Safety and again on July 3, 2012 when the new lockable housekeeping cart arrived. Regular monthly In service meetings will include use and care of housekeeping cart. The Director of Housekeeping will report her findings to the Facility Quality Assurance Committee that meets quarterly. The Housekeeping or Nursing Staff will notify Maintenance by direct call for immediately response of need for adjustment and/or repair.  The Nursing Staff will include monitoring of the housekeeping cart daily on their check list. Visual observation will also be done by staff during housekeeping hours. This practice will be done indefinitely on an ongoing basis. The findings will be reported to the Facility Quality Assurance Committee that meets quarterly.	
F 371 SS=E	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	F 371	Bermuda Village will store, prepare, distribute and serve food under sanitary conditions. The oscillating fan observed as dust filled and unsanitary was cleaned thoroughly by kitchen staff on 6/26/12 and 6/27/12.	

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F 371	<p>Continued From page 2</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations and staff interview the facility failed to ensure dishware was clean for use.</p> <p>The findings are:</p> <p>An initial tour of the kitchen was made on 6/26/12 at 10:45 a.m. with the Food Service Director (FSD). The dishwashing area was observed in use following the breakfast meal and revealed clean dishware was placed in a designated area for drying. An oscillating circular fan was used to dry the clean dishware ready for use. On 6/26/12 at 10:50 a.m. the fan was observed with the FSD and revealed heavy accumulation of dust approximately ¼ inch thick covering the individual rungs and blades of the fan. The fan was positioned to blow air directly onto the clean dishware. The FSD was interviewed during this observation, turned the fan off and stated it had not been cleaned and should not be in use until cleaned. He added that staff had not been trained or expected to clean the fan. He also reported he did not utilize an equipment cleaning schedule for routine cleaning of the kitchen's equipment.</p>	F 371	<p>After two days, it was observed by Food Service Director (FSD) to be in need of cleaning again. A decision was made by the FSD and the DON to remove the fan from the kitchen permanently. There is no oscillating fan in the kitchen near food or utensils.</p> <p>F371 Addendum</p> <p>The oscillating fan observed as dust filled and unsanitary has been permanently removed from the kitchen.</p> <p>Dietary Staff has implemented monitoring measures to ensure that the deficient practice cited will not occur. Dietary Staff will monitor the cleaning of all equipment and record on a weekly task chart. This practice will be done indefinitely as part of quality assurance and records kept in the facility for up to one year. Visual observation will also be done daily by staff in charge during working hours. Findings reported to FSD. Maintenance personnel will rectify any problem areas/concerns. The FSD will include maintaining a Sanitary Kitchen in his monthly In service meetings and review the weekly task charts. This practice will be done on an ongoing basis and findings reported to the Facility Quality assurance Committee that meets quarterly.</p>	
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7-23-12