

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

PRINTED: 11/25/2014  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345190</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/30/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>MURPHY MEDICAL CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>4130 US HWY 64 EAST MURPHY, NC 28906</b>	
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F 371 SS=E	<p>483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY</p> <p>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>This REQUIREMENT is not met as evidenced by: Based on observations and staff interviews, the facility failed to seal and date open food items in the freezer, refrigerator and dry storage areas, failed to clean the circulating fans and ceiling of the walk in refrigerator, and failed to clean and dry food preparation equipment prior to storage for food preparation.</p> <p>The findings included:  During the tour of the kitchen on 10/27/14 at 11:54 AM the dry food storage area, freezer and refrigerators were observed and food preparation equipment was inspected. The Food Service Director (FSD) was present during all kitchen observations. During the initial tour of the kitchen on 10/27/14 at 11:54 AM the dry food storage area, freezer, refrigerators, and food prep areas were observed as follows:</p> <p>1. On 10/27/14 at 11:54 AM observation was made of dietary staff removing lunch food items from the steam table and cold bar in the kitchenette area of the main dining room and</p>	F 371	<p>" The corrective action will be accomplished for those residents found to have been affected by the deficient practice: 1. No residents were affected by this deficiency</p> <p>" The corrective action will be accomplished for those residents having potential to be affected by the same deficient practice: 1) All food items in the cooler, freezer and dry storage area were covered, labeled, and dated on 10-27-14 2) All meat bins were labeled with thaw/expiration dates on 10/27 3) The two knives and food processor blade found at the time of the inspection were thoroughly cleaned and inspected before returning to service on 10/27/14. 4) All knives and food processor blades were inspected for cleanliness on 10/27/14</p>	11/27/14

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

11/18/2014

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 371	<p>Continued From page 1</p> <p>transporting them into the kitchen for storage in the refrigerator. One tray contained individual melon fruit cups which were in covered bowls over ice and were not dated. There were 5 stainless steel square serving dishes which contained macaroni salad, potato salad, sliced tomatoes, onions, and lettuce which were covered with plastic wrap but were not dated. The dietary staff placed these items on a cart and transported them to the kitchen. At 12:38 PM the melon fruit cups, and stainless steel square serving dishes containing the macaroni salad, potato salad, sliced tomatoes, and onions, and lettuce were observed on a shelf in the refrigerator and remained not dated. The FSD was present at the time and verified they were not dated. The FSD left the refrigerator and returned with dated labels and placed them on the food items and stated the dietary staff should have dated them prior to storing them in the refrigerator.</p> <p>2. On 10/27/14 at 11:54 AM the undated, unlabeled and unsealed items in the refrigerator were observed as follows:</p> <p>a. Thirteen undated plastic wrapped raw meat roasts called flat meats were observed. 9 undated raw roasts were in one plastic tub and 4 undated raw roasts were in a 2nd tub. All 13 of the raw meat roasts were 10 - 15 pounds each were wrapped in the original plastic wrappers that had no date, were removed from the original shipping cartons, and were placed in plastic tubs which had no dates on the tubs or on the racks in the refrigerator.</p> <p>b. One 20 pound bag of raw chicken parts opened, not sealed and not dated in a plastic tub</p>	F 371	<p>5) Cooler fans, ceiling, walls and light fixtures were cleaned on 10/29/14</p> <p>6) Dietary staff were educated on deficient areas by Pam Barmore, Director of Food and Nutrition Services on 10/28/14</p> <p>" The measures that will be put into place or systemic changes made to ensure that the deficient practice will not occur:</p> <p>1) Management checks of cooler, freezer and dry storage area for uncovered, unlabeled and undated food items will be preformed weekly and as unannounced random checks.</p> <p>2) Food labels and tie wraps have been placed at the point of use.</p> <p>3) Cleaning of cooler/freezer ceiling, walls, and light fixtures have been added to the monthly cleaning schedule.</p> <p>4) Management audit sheets have been revised to include auditing the cooler and freezer fans, ceilings, walls and light fixtures for cleanliness. Audits will be performed weekly and as unannounced random checks. To begin 11/14/14</p> <p>5) Management audit sheets have been revised to include labeling of meat bins and covering/labeling/dating of all opened food items. Audits will be performed weekly and as unannounced random checks. To begin 11/14/14</p> <p>6) Procedure for inspection and signing off cleaning assignments of knives and food processor blades added to job duties of diet aides and cooks. Visual cues have been posted at the appropriate stations on</p>		

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F 371	<p>Continued From page 2 with other sealed bags of chicken.</p> <p>c. Two - 20 pound bags of unopened raw chicken parts without dated labels in an undated plastic tub.</p> <p>d. Two trays of raw chick leg drumsticks were not sealed in the refrigerator. Both trays were covered with brown parchment paper with the chicken opened around all the edges and exposed to the air showing 1 to 1 1/2 inches of the raw chicken on all four sides.</p> <p>e. Eight wrapped 10 pound turkey breasts removed from the original packing carton were not dated on the packaged turkey breasts and were not dated on the plastic tub they were stored in.</p> <p>f. One 3 pound bag of grated parmesan cheese opened without dated label.</p> <p>g. One opened 5 pound bag of dried cranberries not sealed and not dated.</p> <p>h. Thirty four bowls of purred fruit in lidded bowls on two trays were undated.</p> <p>i. One hundred bowls of prepared desserts in lidded bowls on three trays were not dated.</p> <p>An interview was conducted with the Food Service Director (FSD) on 10/30/14 at 2:00 PM. The FSD stated she was not aware the items in the refrigerator were opened, not sealed and not dated. The FSD explained that meats and poultry were normally placed in plastic tubs in the refrigerator for thawing before use and should have been dated on the front of the tub when they</p>	F 371	<p>11/17/14. Further detailed education planned for 11/20/14.</p> <p>7) Knives will be stored on a magnetic storage bar to accommodate visual inspection.</p> <p>8) Frequency of preventative maintenance/cleaning schedule of cooler fans has been increase to 3 times per year.</p> <p>9) All open food will be sealed with plastic wrap, Ziploc bag or other lidded container. Visual cues have been posted by the freezer door, the cooler door and the storage room. Further detailed education planned for 11/20/14.</p> <p>10) Employees completing the daily cleaning assignment sheet will be required to initial the form instead of check marks to facilitate accountability.</p> <p>11) Orientation of new employees will include the procedures outlined above.</p> <p>12) Annual training of the above procedures will be implemented.</p> <p>" The facility plans to monitor its performance to make sure that solutions are sustained and effective by:</p> <p>1) Dietary supervisor to audit the Daily Cleaning assignments sheets weekly.</p> <p>2) Dietary supervisor will perform weekly and random unannounced inspections for compliance of covering, labeling and dating of opened food items, cleanliness of fans, ceilings, walls, knives and food processor blades for 90 days or until substantial compliance achieved.</p> <p>3) The results of the inspections will be reviewed with the Food Service Manager.</p>		

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F 371	<p>Continued From page 3</p> <p>were removed from the original packaging cartons. She further explained that any individual bag used from the tubs or packages of meat, poultry or food item that were opened should have been resealed and dated with the open date and use by date. The FSD revealed any food item taken from the original dated carton should have been labeled and dated. The FSD verified the food items observed in the refrigerator were not properly sealed, labeled and dated. The FSD further verified that prepared foods such as desserts and salads brought into the refrigerator should have been sealed and dated. The FSD stated that it was her expectation for all food items in the refrigerators should have been securely wrapped, sealed and dated.</p> <p>3. On 10/27/14 at 11:54 AM foods observed in the freezer were opened, unsealed, undated as follows:</p> <p>a. One opened 10 pound bag of country fired steak was unsealed and undated.</p> <p>b. One opened 10 pound bag of chicken breasts was unsealed and undated.</p> <p>c. One lone pound bag of sweet potatoes fries was unsealed and undated.</p> <p>An interview was conducted with the Food Service Director (FSD) on 10/30/14 at 2:00 PM. The FSD stated she was not aware the items in the freezer were opened, not sealed and not dated. The FSD explained that any food items removed form the original packaging cartons should be sealed and dated. She further explained that any individual bag or food item that was opened should have been resealed and</p>	F 371	<p>Any deficiencies will be addressed at this time.</p> <p>4) The results will be analyzed and reported in the monthly QAPI meetings for 3 months or until substantial compliance achieved. Any trends or deficiency will be addressed by the QAPI team at this time.</p> <p>" The corrective action will be completed by:</p> <p>1.) All measures will be complete 11/27/14.</p>		

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F 371	<p>Continued From page 4</p> <p>dated with the open date and use by date. The FSD verified the opened bagged foods in the freezer were not securely wrapped, sealed and dated. The FSD stated that it was her expectation for all food items in the freezers should have been securely wrapped, sealed and dated.</p> <p>4. On 10/27/14 at 11:54 AM observed in the dry storage were one bag each of opened, unsealed, undated food items as follows:</p> <ul style="list-style-type: none"> <li>a. powdered brown gravy</li> <li>b. powdered chicken gravy</li> <li>c. powdered sugar</li> <li>d. mashed potatoes</li> <li>e. bran flakes</li> <li>f. potatoes chips</li> <li>g. box of barley</li> </ul> <p>An interview was conducted with the Food Service Director (FSD) on 10/30/14 at 2:00 PM. The FSD stated she was not aware the food items in the dry storage area were left opened, not sealed and not dated. The FSD explained that any food items that were removed from the original cartons and were opened should have been resealed and dated with the open date and use by date. The FSD verified the food items observed in the dry storage were opened and not securely wrapped, sealed and dated. The FSD stated that it was her expectation for all food items in the dry storage areas should have been securely wrapped, sealed and dated.</p> <p>5. On 10/27/14 at 11:54 AM soiled food preparation equipment were stored as follows:</p> <ul style="list-style-type: none"> <li>a. Two knives stored in a food preparation table</li> </ul>	F 371			

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F 371	<p>Continued From page 5</p> <p>drawer with dried food substance on them.</p> <p>b. One food processor blade with dried food substance on it stored in a large plastic tub which contained other food processor parts and blades.</p> <p>An interview was conducted with the Food Service Director (FSD) on 10/30/14 at 2:00 PM. The FSD stated she was not aware the food preparation equipment was soiled and placed in the storage containers. The FSD acknowledged there was dried food substance present on the knives and food processor blade. The FSD stated that it was her expectation for all food preparation equipment should be clean and free of any food substances when stored and ready for use for food preparation.</p> <p>6. On 10/27/14 at 12:38 PM during a tour of the refrigerators and freezers observed 4 circulating fans in the walk in refrigerator with dirt on the fans cages and dust on ceiling and wall just above the fans at ceiling level.</p> <p>During an observation on 10/29/14 at 10:19 AM the refrigerator fans and ceiling were observed to remain dirty. The FSD observed the 4 circulation fan cages and acknowledged there was dirt present on the fan cages in the refrigerator, on the ceiling and on the wall above the fans at ceiling level. The FSD stated it was her expectation that the fans and ceiling should be dirt free and in good repair. The FSD further explained the cleaning of the refrigerator and freezer should be on a cleaning schedule and kept clean and free of dust and dirt.</p> <p>An interview was conducted on 10/30/14 at 2:20 PM with the Nursing Home Administrator (NHA). The NHA explained it was her expectation all food</p>	F 371			

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F 371	Continued From page 6 items should be properly wrapped, securely sealed, labeled, and dated when opened and placed in the refrigerators, freezers and dry storage. The NHA stated it was her expectation that all refrigerators, coolers, and freezers and kitchen preparation equipment should be cleaned and kept free of dirt, dust and food substances and in operating order.	F 371			
F 520 SS=D	483.75(o)(1) QAA COMMITTEE-MEMBERS/MEET QUARTERLY/PLANS  A facility must maintain a quality assessment and assurance committee consisting of the director of nursing services; a physician designated by the facility; and at least 3 other members of the facility's staff.  The quality assessment and assurance committee meets at least quarterly to identify issues with respect to which quality assessment and assurance activities are necessary; and develops and implements appropriate plans of action to correct identified quality deficiencies.  A State or the Secretary may not require disclosure of the records of such committee except insofar as such disclosure is related to the compliance of such committee with the requirements of this section.  Good faith attempts by the committee to identify and correct quality deficiencies will not be used as a basis for sanctions.  This REQUIREMENT is not met as evidenced	F 520		11/27/14	

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F 520	<p>Continued From page 7</p> <p>by: Based on observations, record reviews, and staff interviews the facility's Quality Assessment and Assurance Committee failed to maintain implemented procedures and monitor interventions that the committee had previously put into place. This failure related to one deficiency which was originally cited during the facility's 08/01/13 recertification survey, and was recited during the facility's current recertification survey. The recited deficiency was in the area of food storage/sanitation. The Facility's continued failure during two consecutive recertification surveys shows a pattern of the facility's inability to sustain an effective Quality Assurance Program.</p> <p>Findings included:</p> <p>This tag is cross referred to: 1. F 371: Food Procurement: Based on observations and staff interviews, the facility failed to seal and date open food items in the freezer, refrigerator, and dry storage areas, failed to clean the circulating fans and ceiling of the walk in refrigerator, and failed to clean and dry food preparation equipment prior to storage for food preparation.</p> <p>During the recertification survey of 10/30/14 the facility was cited for failing to seal and date open food items in the freezer, refrigerator, and dry storage areas. The facility failed to clean the circulating fans and ceiling in the walk in refrigerator. The facility failed to clean and dry food preparation equipment prior to storage. During the recertification survey of 08/01/13 the facility failed to seal a container of hard boiled eggs, discard expired vanilla pudding, remove crusted food spills on the bottom of a convection</p>	F 520	<p>" The corrective action will be accomplished for those residents found to have been affected by the deficient practice: 1. No residents were affected by this deficiency</p> <p>" The corrective action will be accomplished for those residents having potential to be affected by the same deficient practice: 1) Dietary will be required to participate/provide input related to food storage, labeling, covering and dating for at least 3 months or until substantial compliance achieved. 2) Dietary will be required to participate/provide input related to fan, wall, ceiling, knives and food processor blade cleanliness for at least 3 months or until substantial compliance achieved. 3) Dietary will be required to be participate/provide input to the QAPI committee at least quarterly or as issues arise.</p> <p>" The measures that will be put into place or systemic changes made to ensure that the deficient practice will not occur: 1) Individual departments and all outside contracted or arranged provider and suppliers of care and services will participate/provide input to be reviewed in the QAPI process at least quarterly. 2) If a problem is identified by the internal</p>		



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F 520	Continued From page 8 oven, discard an opened bottle of syrup, and replace a crusted microwave oven.  On 10/30/14 at 4:00 PM an interview with the Administrator and the Food Service Director was conducted about the facility's Quality Assessment and Assurance (QAA) Committee. The Administrator revealed the facility's QAA committee meetings were held monthly, and the plan of correction related to the previous recertification survey completed on 08/01/13 was being monitored by way of checks and audits. She further revealed there are at least 2 Quality Improvement plans in place currently which include, daily cleaning checks and audits to check labels and out of date items, and sanitizing surfaces. The administrator verified that all audits had shown no issues to this point in time, and does not know why there were unlabeled items, dirty equipment, and dirty surfaces found.	F 520	monitoring process of the individual departments, contracted or arranged provider and suppliers of care and services it will be forward to the QAPI committee for review, plan of action and monitoring of corrective action.  " The facility plans to monitor its performance to make sure that solutions are sustained and effective by: 1) Participation by individual departments, contracted or arranged provider and suppliers of care and services will be monitored and enforced by the Administrator.  " The corrective action will be completed by: 1) Corrective action will be complete by 11/27/14		