

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345051	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED R 01/23/2015
NAME OF PROVIDER OR SUPPLIER ANSON HEALTH AND REHABILITATION			STREET ADDRESS, CITY, STATE, ZIP CODE 405 SOUTH GREENE STREET WADESBORO, NC 28170		
(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	
{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, record review and staff interviews, the facility failed to date two opened single serving food items, date and label one opened sports drink and discard an expired renal supplement in 2 of 2 resident nourishment refrigerators. Findings included:</p> <p>The facility undated policy titled "Dietary/Food Handling" indicated opened containers must be dated and sealed or covered during storage and must be discarded after twenty four hours. All foods belonging to residents must be labeled with a name, dated and used within seventy two hours.</p> <p>A review of the facility audit records indicated the dietary manager last checked the resident nourishment refrigerators on 1/14/15. There were no noted issues or concerns documented.</p> <p>In an observation of the resident nourishment refrigerator at the main nursing station on 1/21/15 at 9:40 AM, an opened single serving of a liquid thickener and an opened single serving of apple</p>	{F 371}	<p>Corrective Action For Residents Found To Be Affected</p> <p>Items that were opened and not dated or labeled were discarded by the Dietary Manager at the time of the survey.</p> <p>Corrective Action For Residents With The Potential To Be Affected</p> <p>Both nourishment room refrigerators were reviewed by the Dietary Manager at the time of survey. No other opened or un-labeled items were found.</p> <p>Measures Put Into Place Or Systemic Changes Made</p> <p>The Dietary Manager has been re-educated by the Administrator on 1/22/15 regarding the policy for properly dating items placed in the nourishment refrigerators</p>	2/13/15	

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

TITLE

(X6) DATE

Electronically Signed

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>sauce were observed in the refrigerator door on the top shelf. The foil tops were observed opened lying over the surface of the top rim of the container. On the second shelf in the refrigerator was a half full bottle of a sports drink. The bottle had no resident name or date opened. In an interview on 1/21/15 at 9:40 AM, nurse # 1 stated the single serving items should have been discarded and the sports drink should have been labeled with a resident's name and dated when opened. Nurse #1 stated the temperature of the resident nourishment refrigerator was checked daily, but the dietary manager checked them weekly for content.</p> <p>In an observation of the resident nourishment refrigerator at the new nursing station on 1/21/15 at 10:50 AM there was an observed unopened renal supplement in the refrigerator door. The expiration date was December 2014. Nurse #2 stated expired supplements should not be in the resident nourishment refrigerator but be discarded. Nurse #2 stated the dietary manager checked the resident nourishment refrigerators weekly to ensure all items were dated and not expired.</p> <p>In an interview on 1/22/15 at 9:55 AM, the dietary manager stated she was responsible for checking the resident nourishment refrigerators content weekly. She stated she last checked them 1/19/15 and she did not see any opened and undated items or the expired renal supplement. The dietary manager stated she should have discarded the renal supplement before the end of December but she missed it.</p> <p>In an interview on 1/22/15 at 10:00 AM the administrator stated she expected there to be no</p>	{F 371}	<p>and to review each nourishment room refrigerator on a daily basis. On the weekend, the manager on duty will review the refrigerators to ensure compliance. On January 22,2015, the nurses and aides have been re-educated by the Director of Nursing regarding dating any item that is going into the nourishment room refrigerators.</p> <p>Monitoring</p> <p>The Dietary Manager will audit the refrigerators using an audit tool on a daily basis, and on the weekend, the weekend on duty manager will audit the refrigerators for compliance. Results of the audits will be reported to the facilities monthly QAPI meeting, by the Dietary Manager. The Dietary Manager will be responsible to follow-up on any further recommendations from the QAPI committee.</p>		

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

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{F 371}	Continued From page 2 undated or unlabeled items in the resident nourishment refrigerators. She further stated she expected single use items not to be placed back into the refrigerators since they could not be securely covered and sealed. The administrator stated she expected there to be no expired items for resident consumption in the resident nourishment refrigerators and the dietary manager should have seen the renal supplement that expired December 2014 and discarded it a month ago.	{F 371}		