

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345556	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 06/18/2015
NAME OF PROVIDER OR SUPPLIER DEERFIELD EPISCOPAL RETIREMENT			STREET ADDRESS, CITY, STATE, ZIP CODE 1617 HENDERSONVILLE ROAD ASHEVILLE, NC 28803		
(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 000	INITIAL COMMENTS	F 000			
F 371 SS=E	<p>No deficiencies were cited as result of the complaint investigation. Event #NC00107282.</p> <p>483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY</p> <p>The facility must -</p> <p>(1) Procure food from sources approved or considered satisfactory by Federal, State or local authorities; and</p> <p>(2) Store, prepare, distribute and serve food under sanitary conditions</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observations and staff interviews the facility failed to discard outdated foods and ensure foods were dated and labeled in 2 of 2 refrigerators.</p> <p>The findings included:</p> <p>1a. Initial tour of the skilled kitchen was conducted on 06/15/15 at 8:30 AM with the Director of Dining Services. Observation of reach in refrigerator #1 revealed one unopened package of sliced pastrami meat with use by date of 12/25/14, one unopened package of sliced corned beef top round with use by date 06/05/15, one open and wrapped container of prunes with discard date 06/05/15, and one bag of dark green leafy vegetable not labeled or dated.</p> <p>On 06/15/15 at 8:45 AM an interview was</p>	F 371	<p>This plan of correction in response to the Statement of Deficiencies demonstrates our good faith and desire to improve the quality of care and services rendered to our residents. By submitting this plan of correction, the facility does not, however, admit that any deficiency actually existed at the time of the survey. This plan of correction constitutes a written allegation of substantial compliance</p> <p>F371 483.35 (i) -</p> <p>FOOD PROCURE, STORE/PREPARE/SERVE & SANITARY</p> <p>A. Residents found to have been affected by the alleged deficient practice:</p> <p>All resident had the potential to be</p>	7/2/15	

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

TITLE

(X6) DATE

Electronically Signed

07/02/2015

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>conducted with Director of Dining Services who stated refrigerators in the skilled kitchen were to be checked on a daily basis for outdated food and to assure food was labeled and dated. Director of Dining Services verified that in refrigerator #1 pastrami, corned beef, and prunes should have been discarded and dark green leafy vegetable should have been labeled and dated.</p> <p>On 06/15/15 at 2:40 PM an interview was conducted with Dietary Lead Server #1 who stated she checked for outdated food in refrigerator #1 last Friday (06/12/15). Dietary Lead Server #1 stated she overlooked checking the date on the prunes and did not check the dates on the pastrami and corned beef because they were delivered from the main kitchen and she assumed the dates were good.</p> <p>On 06/15/15 at 2:50 PM an interview was conducted with Sous Chef #1 who stated pastrami and corned beef stored in refrigerator #1 were outdated and stated the meat had been in refrigerator #1 for approximately 3 weeks. Sous Chef #1 stated the pastrami and corned beef should have been discarded.</p> <p>1b. Initial tour of the skilled kitchen was conducted on 06/15/15 at 8:30 AM with the Director of Dining Services. Observation of reach in refrigerator #2 revealed one opened container of heavy ultra-pasteurized whipping cream with expiration date 04/27/15, sautéed vegetable base 16 ounce with discard date of 05/04/15, beef base 16 ounce with discard date 06/07/15, one bag of celery with discard date of 06/12/15, undated open container crab base 16 ounce, undated unopened container baking blend with cultured nonfat buttermilk 32 ounces, undated flat</p>	F 371	<p>affected, a review of kitchen perishables was performed with the assistance of the DHSR surveyors on 6/15/15, and all items improperly dated or outdated were discarded on 6/15/15.</p> <p>B. Residents having potential to be affected by the same alleged deficient practice:</p> <p>All residents have the potential to be affected by this practice. In response to this issue identified on 6/15/15, the Nutrition Services Manager and Director of Dining Services performed an independent audit of the kitchen perishables on 6/17/15 and discarded any additional items that were improperly dated or outdated. New labels were applied to all replacement supplies. The replacement supplies were labeled with a ζused by dateζ if not already labeled with this date from the manufacturer and ζlot numberζ was provided for any product that was not in the original packaging.</p> <p>C. Systematic change made to ensure that the alleged deficient practice will not occur:</p> <p>Policy changes were made to date food with use by date (if not already clearly marked on the packaging from the manufacturer) and lot number (when item is not in the original packaging). This change was made to the policy on 6/19/15.</p>		

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F 371	<p>Continued From page 2 of unpasteurized eggs and undated unopened liquid pasteurized eggs.</p> <p>On 06/15/15 at 8:45 AM an interview was conducted with Director of Dining Services who stated refrigerators in the skilled kitchen were to be checked on a daily basis for outdated food and to assure food was labeled and dated. Director of Dining Services verified that in refrigerator #2 outdated heavy whipping cream, sautéed vegetable base, beef base, and bag of celery should have been discarded and crab base, baking blend with cultured nonfat buttermilk, flat of unpasteurized eggs and bag of liquid pasteurized eggs should have been dated.</p> <p>On 06/15/15 at 3:06 PM an interview was conducted with Sous Chef #2 who stated she was responsible to check for outdated food items and assure food items were labeled and dated in refrigerator #2. Sous Chef #2 stated she checked all of the creams for outdates in refrigerator #2 last Friday (06/12/15) and missed checking the date on pasteurized whipping cream and stated she should have discarded the pasteurized whipping cream. Sous Chef #2 stated she overlooked checking the date on the bag of celery and celery should have been discarded on Friday. Sous Chef #2 stated she overlooked checking the dates on the sautéed vegetable, and beef base and they were outdated and discarded today. Sous Chef #2 stated she should have checked for an open date on the crab base and had not checked for an expiration date on the baking blend with cultured nonfat milk and discarded the crab base and baking blend today. Sous Chef #2 stated she was unsure of when the liquid pasteurized eggs were delivered to the skilled kitchen because they were undated and should</p>	F 371	<p>Inservice Training will be performed by the Nutrition Services Manager or Director of Dining Services for all current healthcare dining staff by 7/16/15. Ongoing training will be incorporated into orientation of new healthcare dining staff and performed annually for existing healthcare dining staff. The training will cover the above policy changes and checking of kitchen perishables daily. This daily perishable check will be performed by a member of the dining staff as assigned each day by the cook or other designee. The training will also include the importance of checking for <u>USE BY</u> labels and if the product is in date. Items found to be out of date or unlabeled as described in the policy will be discarded immediately and replacement items requested. This will be documented on the daily check sheet.</p> <p>D. Monitoring Process:</p> <p>A monthly audit of kitchen perishables will be performed by the Registered Dietician Consultant or Nutrition Services Manager beginning on 7/10/15. This audit will include validation of the daily check sheets and the status of the kitchen perishables as it relates to labeling and being within date for use.</p> <p>These findings will be submitted in a report to the Quality Assurance Performance Improvement Committee monthly for three months for recommendation and the need for further system modification and education of</p>		

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

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F 371	<p>Continued From page 3</p> <p>have been discarded. Sous Chef #2 stated she discarded the liquid pasteurized eggs today. Sous Chef #2 stated she was unsure when the flat of unpasteurized eggs were delivered to the skilled kitchen because they were not dated.</p> <p>On 6/16/15 at 9:34 AM an interview was conducted with the Director of Dining Services who stated her expectations were that dietary staff in skilled kitchen would have checked food items in refrigerator #1 and #2 for outdates and discarded outdated food items and checked that food items were labeled and dated. Director of Dining Services stated what had happened in the skilled kitchen with expired, undated, and unlabeled food was caused by human error. Director of Dining Services stated she had not realized in the facility central food storage area that pasteurized liquid eggs had been removed from their original containers and delivered to the skilled kitchen and were not dated when received in the skilled kitchen.</p>	F 371	<p>staff. This report will be presented by the Nutrition Services Manager or Designee.</p>		