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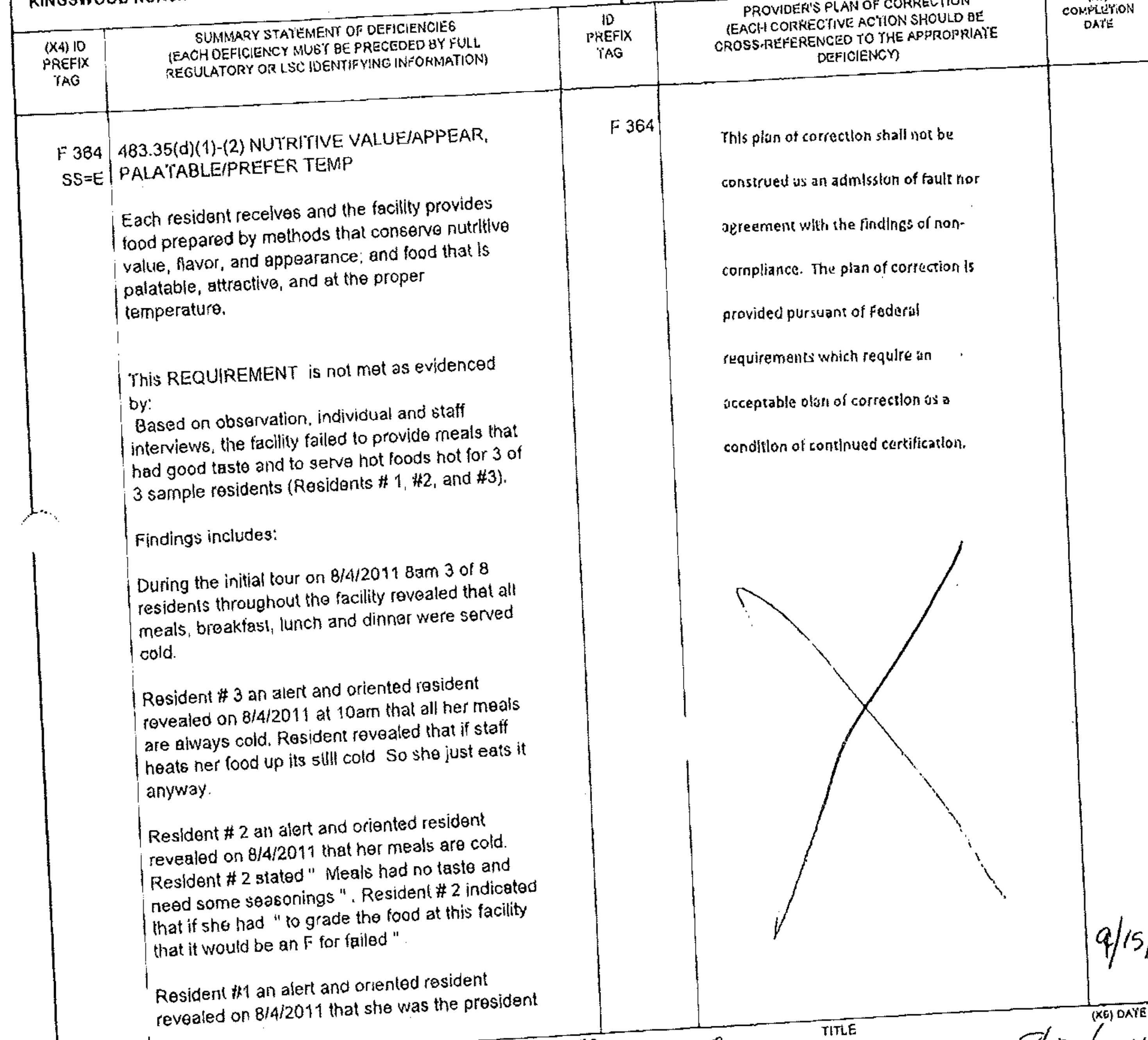
FORM APPROVED
OMB NO. 0938-0391

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



STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345509	(X2) MULTIPLE CONSTRUCTION A. BUILDING ___ B. WING ___	(X3) DATE SURVEY COMPLETED C 08/04/2011

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
KINGSWOOD NURSING CENTER	915 PEE DEE ROAD ABERDEEN, NC 28315

(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 364 SS=E	483.35(d)(1)-(2) NUTRITIVE VALUE/APPEAR, PALATABLE/PREFER TEMP Each resident receives and the facility provides food prepared by methods that conserve nutritive value, flavor, and appearance; and food that is palatable, attractive, and at the proper temperature. This REQUIREMENT is not met as evidenced by: Based on observation, individual and staff interviews, the facility failed to provide meals that had good taste and to serve hot foods hot for 3 of 3 sample residents (Residents # 1, #2, and #3). Findings includes: During the initial tour on 8/4/2011 8am 3 of 8 residents throughout the facility revealed that all meals, breakfast, lunch and dinner were served cold. Resident # 3 an alert and oriented resident revealed on 8/4/2011 at 10am that all her meals are always cold. Resident revealed that if staff heats her food up its still cold So she just eats it anyway. Resident # 2 an alert and oriented resident revealed on 8/4/2011 that her meals are cold. Resident # 2 stated " Meals had no taste and need some seasonings " . Resident # 2 indicated that if she had " to grade the food at this facility that it would be an F for failed " . Resident #1 an alert and oriented resident revealed on 8/4/2011 that she was the president	F 364	This plan of correction shall not be construed as an admission of fault nor agreement with the findings of non-compliance. The plan of correction is provided pursuant of Federal requirements which require an acceptable plan of correction as a condition of continued certification.	9/15/11

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
[signature]	[signature]	8/30/2011

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 364	Continued From page 1 of resident council and food has been an issue for months but the residents stopped complaining to the facility because of the issues with staff in the kitchen. Resident # 1 revealed that her breakfast was so cold this morning her eggs tasted like they came out of the refrigerator and her food was still cold after she asked staff to heat it. Resident # 1 stated the alternate is usually a sandwich and soup, but you can eat a cold sandwich with no problems Review of the resident council minutes dated May 2011 until present had no issues of food being cold and/or not having any flavor. However the facility had some issues with food being cold in November 2010. Resident trays were observed leaving the kitchen on 8/4/2011 at 12:10pm in open-ended carts. The plates were covered with an insulated lid and bottom. A Test Tray was requested on 8/4/2011 at 12:45pm. The test tray was placed on the last feeder cart for the hall. The cart left the kitchen at 12:52pm. After the last resident on the hall received their tray at 1pm, the Dietary Manger, Registered Dietitian Staff from the corporate office, Administrator and surveyor went into the main dining room at 1:05pm to taste the test tray The plate had garlic pork loin, au gratin potatoes, and collard greens. All food items were tasted; each taster agreed that garlic pork loin, au gratin potatoes, and collard green were luke warm. The Registered Dietitian and surveyor indicated that the collard greens have no seasoning. The Administrator and Surveyor agreed that the coffee was also luke warm.	F 364	F364: a) Dietary Manager or designee will do test trays of all 3 meals each day X 2 weeks. Administrator will review temperatures to determine if need to continue each meal and each day. If temperatures are not consistently improved in 2 weeks, the daily monitoring of each meal will continue. Afterwards test trays will be done randomly 1 meal per day for 1 month x 3 Months. b) Beginning August 22, 2011, the Dietary Manager will interview at least 2 residents per week about the quality of the food. c) Both ovens and convection oven have been repaired. The Maintenance Supervisor will monitor the kitchen equipment on a weekly basis x 1 month then 1 x per month afterwards. Any Equipment Issues will be reported to the Administrator and Health Services Group immediately. d) All results of test trays, resident interviews and maintenance monitoring will be presented to the Quality Assurance Committee for review and monitor-	9/15/11

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F 364	Continued From page 2 Interview with Resident # 3, an alert and oriented resident revealed on 8/4/2011 at 1:30pm that her lunch was cold. She stated that she only ate the pork loin, collard greens had no flavor and she did not want the potatoes. Interview with Resident # 2, an alert and oriented resident revealed on 8/4/2011 at 1:45pm her lunch had no seasoning and was cold. Interview with Resident # 1 an alert and oriented resident revealed on 8/4/2011 at 1:55pm that her lunch was cold as usual. Resident # 1 stated " Hopefully one day it will get better, we just eat what we can " . Interview with the Dietary Manager revealed on 8/4/2011 at 2:10pm revealed that she had only been at this facility for three weeks. DM revealed that she had no knowledge of residents complained about the food. She agreed that pork loin and potatoes tasted luke warm. Interview with the Administrator on 8/4/2011 at 3pm she agreed that the coffee was lukewarm. She indicated that the facility has some issues about six weeks ago and she believes that was some of the concerns with the residents ' food issues. She also indicated that with this new dietary manager, she hopes that issues will get better.	F 364		
F 456 SS=E	483.70(c)(2) ESSENTIAL EQUIPMENT, SAFE OPERATING CONDITION The facility must maintain all essential mechanical, electrical, and patient care equipment in safe operating condition.	F 456		

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F 456	Continued From page 3 This REQUIREMENT is not met as evidenced by: Based on observation, record review and staff interviews the facility failed to maintain 2 of 3 ovens in the kitchen in a safe operating condition Findings include: During the tour on 8/4/2011 at 9:30am in the kitchen the convection oven was observed with the left side hanging off of it. The cook indicated that maintenance had been called to fix the side of the convection oven. The 2 standard ovens and stove top were observed. The cook revealed that the stove top works but the ovens had not worked in 6 months or longer. The cook also revealed that the Dietary Manager and Administrator knew about the ovens. Interview with the Dietary Manager (DM) on 8/4/2011 at 9:50am revealed that she was still learning about this kitchen. The DM indicated that she had only been here three weeks or less and the ovens had not worked during that time. The DM also revealed that the Administrator was aware Resident # 3 an alert and oriented resident stated in an interview on 8/4/2011 at 10am that all her meals were always cold. The resident also revealed that when staff reheated her food, it was still cold, but she would eat it anyway. Resident # 2 an alert and oriented resident stated on 8/4/2011 in an interview that her meals were cold. The resident stated " Meals had no taste	F 456	F364: a) Dietary Manager or designee will do test trays at all 3 meals each day X 2 weeks. Administrator will review tempertures to determine if need to continue each meal and each day. If temperatures are not consistently improved in 2 weeks, the daily monitoring of each meal will continue. Afterwards test trays will be done randomly 1 meal per day for 1 month x 3 Months. b) Beginning August 22, 2011, the Dietary Manager will interview at least 2 residents per week about the quality of the food. c) Both ovens and convection oven have been repaired. The Maintenance Supervisor will monitor the kitchen equipment on a weekly basis x 1 month then 1 x per month afterwards. Any Equipment issues will be reported to the Administrator and Health Services Group immediately. d) All results of test trays, resident interviews and maintenance monitoring will be presented to the Quality Assurance Committee for review and monitoring of results.	9/15/11

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F 456	Continued From page 4 and needed some seasonings " . The resident indicated that if she had " to grade the food at this facility that it would be an F for failed " . Resident #1 an alert and oriented resident revealed in an Interview on 8/4/2011 that she was the president of resident council and food had been an Issue for months. However, the residents stopped complaining to the facility because of issues with staff in the kitchen. The resident also revealed that her breakfast was so cold this morning that her eggs tasted like they came out of the refrigerator and her food was still cold after she asked staff to reheat it. During observation of the tray line on 8/4/2011 at 11:30am temperature of the meals to be served was taken. The Pork Loin had to be reheated three different times to read 140 degrees. The Pork Loin was placed in the convection oven due to the standard ovens not working. An interview on 8/4/2011 at 2:40pm with the Maintenance Manager (MM) revealed that he had a repair log book that had no documentation of the oven in the kitchen not working . He stated that he had been there 3 months and he had tried to fix the oven but he could not. The MM indicated that the Adminstrator knew that the standard ovens were not working. An interview with the Administrator on 8/4/2011 at 3pm revealed that she had been at this facility since March 2011 and the ovens had not worked. She also revealed that she knew about 6 weeks ago that the residents had some food issues due to some problems with the ice machine and the convection oven not working. But that problem	F 456		

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F 456	Continued From page 5 had been fixed. The administrator revealed that both standard ovens had been out since she had been here.	F 456		9/15/11