

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

PRINTED: 07/14/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345548	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 05/01/2014
NAME OF PROVIDER OR SUPPLIER ASHTON PLACE HEALTH AND REHAB			STREET ADDRESS, CITY, STATE, ZIP CODE 5533 BURLINGTON ROAD MC LEANSVILLE, NC 27301		
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F 000	INITIAL COMMENTS IDR conducted 6/23/14. F 221, F 242, F 318 deleted. Facility requested additional review of the F 156 and F 167. Additional review provided and F 156 and F 167 deleted.	F 000			
F 364 SS=D	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 test tray meal observation, resident, staff and family interview, the facility failed to provide palliative food for 3 of 3 residents (Resident #28, #80 and #79). The findings included: During a test tray on 5/1/14 at 1:50PM, the following items were tasted with the DM: mashed potatoes were lukewarm to taste, stewed tomatoes were warm to taste, green beans, warm and chewy/raw to taste, pork with gravy was cold to taste, turkey with gravy was lukewarm to taste, pureed turkey was luke warm to taste and pureed noodles cool to taste. The DM indicated that food temperatures were low and should have been warmer. The DM added that she was aware of the resident 's food concerns through individuals and resident council meetings since February 2014. The DM further stated that modifications in	F 364	<u>F364</u> <i>Preparation/and or execution of this Plan of Correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The Plan of Correction is prepared and/or executed solely because it is required by the provision of Federal and State law.</i> <u>Concerning food temperature:</u> We will in-service cooks on the following items: <ul style="list-style-type: none"> • Batch cooking. • Holding food through service. • Checking temperatures throughout service. • Proper procedures of bringing food back up temperature if temperatures are not at appropriate levels. Persons responsible are cooks, corporate chef, dietary manager, assistant dietary manager, manager-in-training and district manager. Target date is a continuous effort. Update/Outcome/Date Resolved is to make sure that temperatures are hot enough when residents receive their food.	5/26/14	

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

[Handwritten Signature]

TITLE

[Handwritten Signature]

(X6) DATE

July 21, 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 364	<p>Continued From page 1 the kitchen were in progress.</p> <p>Review of Resident #28 ' s quarterly Minimum Data Set (MDS) dated 4/10/14, revealed the ability to understand and be understood by others with intact cognition and identified by staff as alert and oriented.</p> <p>During the initial tour on 4/28/14 at 6:30PM, Resident #28 indicated that the food was not edible at times. Resident #28 added the chicken salad sandwich she had for dinner was tough to chew. She added that most meats were tough and the food did not come to her hot. She indicated that she had spoken with several of the dietary staff and they still could not get the food together.</p> <p>During an interview on 5/1/14 at 8:30AM, family member indicated that normally the kitchen sends a menus selection sheet so that meals could be selected for the day. She added the kitchen continued to send things that were not on the list and/or things she did not eat. The family referred to the grits as an example of one of the items not selected or eaten. Additional, items sent to Resident #28 that was not selected due to dislikes or stomach problems included tomato base/pasta sauce foods. She further indicated this had been a constant issue. She indicated that her mother continued to speak with dietary staff about the choices and the meats being hard and tough/difficulty to chew, so she ends up eating grilled cheese sandwiches.</p> <p>During a follow-up interview on 5/1/14 at 2:10PM, Resident#28 indicated that the string beans tasted raw and the pork was tough and she could</p>	F 364	<p><u>Concerning proper cooking techniques:</u></p> <p>In-service cooks on the following:</p> <ul style="list-style-type: none"> • Proper way to cook meats and vegetables. • Understanding that the residents like tender and well cooked vegetables. • Instructing cooks to taste everything that is served. <p>Persons responsible are cooks, corporate chef, dietary manager, assistant dietary manager, manager-in-training and district manager.</p> <p>Target date is continuous effort.</p> <p>Update/Outcome/Date resolved is to make sure the food is palatable and the residents are satisfied.</p> <p><u>Concerning performing test trays:</u></p> <p>Performing five test trays per week for the next three weeks. The test tray tool will be used to perform this test.</p> <p>Persons responsible are cooks, corporate chef, dietary manager, assistant dietary manager, manager-in-training and district manager.</p> <p>Target dates are May 26, 2014 through June 17, 2014.</p> <p>Update/Outcome/Date Resolved is residents satisfied with palatable food.</p>		

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F 364	<p>Continued From page 2 not eat it.</p> <p>Review of Resident #80 ' s quarterly Minimum Data Set (MDS) dated 2/26/14, revealed the ability to understand and be understood by others with intact cognition and identified by staff as alert and oriented.</p> <p>During the initial tour on 4/28/14 at 6:30PM, Resident #80 indicated that the vegetables were mushy and tasteless and lunch and dinner meals did not come hot, it was barely warm. She added that her family has spoken with the kitchen staff several times about the food and nothing has changed in the past month.</p> <p>During an observation on 5/1/14 at 2:15PM, Resident #80 indicated the pork with gravy was cold, hard and difficult to chew, the vegetables were lukewarm and the meal arrived late. You just get tired and eat what you can.</p> <p>Review of Resident #79 ' s quarterly Minimum Data Set (MDS) dated 2/18/14, revealed the ability to understand and be understood by others with intact cognition and identified by staff as alert and oriented.</p> <p>During an interview on 5/1/14 at 8:49AM, NA# 3 indicated that when a resident has food concerns they were reported to nursing. She indicated that if a resident asked to reheat the food staff would go to the nourishment room to reheat the meal. She indicated some residents had reported concerns about the food temperatures.</p> <p>During an interview on 5/1/14 at 10:30AM, NA#2 indicated that residents had complained about the food quality and missing items on tray. She</p>	F 364	<p><i>Preparation and/or execution of this Plan of Correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The Plan of Correction is prepared and/or executed solely because it is required by the provision of Federal and State law.</i></p>	

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F 364	<p>Continued From page 3</p> <p>indicated that most of the time staff had to call back to the kitchen to get a replacement or alternate. She added that if the resident asked for the food to be reheated staff would have to go to the nourishment room to reheat the item.</p> <p>During an observation on 5/1/14 at 2:10PM, Resident #79 was attempting to eat the pork with gravy, stewed tomatoes and mashed potatoes. Resident #79 stated that she could not eat the pork with gravy because it was too tough, the stewed tomatoes were not edible and the mashed potatoes were cold. The family went to the kitchen to get Resident #79 a salad due to difficulty consuming the selected meal.</p> <p>During an interview on 5/1/14 at 2:10PM, a family member indicated that she assisted Resident #79 with the daily meal selections. The family further stated that Resident#79 did not always get was selected on the menu and the meats were tough and difficult to chew. The meal came cold sometimes and you have to ask for the meal to be reheated. In addition, the facility staff had been made aware of the food quality for several months. The family indicated that they had to go to the kitchen to get something Resident #79 could eat which was a salad.</p> <p>During an interview on 5/1/14 at 12:20PM, the administrator indicated he was aware of the resident ' s food concerns. He further indicated that the expectation would be the DM develop an organized system to ensure the food concerns were resolved to the satisfaction of the residents. The DM was responsible for resolving resident council concerns regarding foods and report back to them monthly with the resolution. Residents should received their preference per the meal</p>	F 364	<p><i>Preparation and or execution of this Plan of Correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The Plan of Correction is prepared and/or executed solely because it is required by the provision of Federal and State Law.</i></p>	

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F 364	Continued From page 4 card Review of the resident council minutes from January 2014 to April 8, 2014, revealed several concerns with the food quality, temperatures and choices. The DM was present during the meetings the concerns had not been resolved to the satisfaction of the residents.	F 364	F 371 <i>Preparation/and or execution of this Plan of Correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The Plan of Correction is prepared and/or executed solely because it is required by the provision of Federal and State law.</i>	
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 This REQUIREMENT is not met as evidenced by: Based on observations, staff interviews, and record review, the facility failed to maintain sanitary conditions in the kitchen by 1) ensuring that fresh produce was removed from spoiled/rotten produce in 1 of 1 walk in refrigerator, 2) cleaning the meal cart that had fresh salads that was stored in 1 of 1walk in refrigerator, 3) Clean and remove the food debris and grease from the steamer box and hot plate cart, 4) separate dented cans from ready to use food items, 5) discard expired hamburger buns and 6) failed to air dry 30 wet serving pans in 1 of 1 dry storage areas.	F 371	Concerning removal of spoiled/rotten food: We will monitor all storage areas whether refrigerated or dry for spoiled/rotten foods. This is part of the opening and closing walk-through that is done on a daily basis. Persons responsible are account manager, assistant account manager, manager-in-training, diet aids and cooks. Target date is continuous effort. Update/Outcome/Date Resolved is to ensure that no spoiled/rotten foods are in the dietary department. Concerning cleaning storage racks and cards: We will in-service the staff on the following: <ul style="list-style-type: none"> • Wiping down cards after service. • Following their daily cleaning assignments and asking for help when unable to accomplish. 	5/26/14

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F 371	<p>Continued From page 5 The findings included:</p> <p>1. During an observation of the kitchen on 4/28/14 at 7:40PM, the walk in refrigerator had 1 box of fresh tomatoes which contained spoiled/rotten tomatoes and onions that were mushy and molded.</p> <p>During an interview on 4/28/14 at 8:05PM, the dietary manager assistant (DMA) and registered dietician (RD), dietary manager indicated the fresh produced should be checked when delivered and the spoiled/rotten produce should be discarded.</p> <p>2. During an observation on 4/28/14 at 7:40PM, the walk in refrigerator had 1 meal cart that had fresh salad stored on the trays/shelves. The cart was dirty with dried food and liquids on the cart. During an interview on 4/28/14 at 8:05PM, the dietary manager assistant (DMA) and RD indicated that cart should be cleaned every night before foods were place on the cart and stored in the refrigerator.</p> <p>3. During an observation on 4/28/14 at 7:40PM, the steamer box and hot plate cart had a large volume of grease and food/liquid build up on the inside and outsides of the units.</p> <p>During an interview on 4/28/14 at 8:05PM, the dietary manager assistant (DMA) and RD indicated that steamer box and hot plate cart should be cleaned every night.</p> <p>4. During an observation on 4/28/14 at 7:40PM, the following items were found dented: 3 cans of pinto beans, 2 cans of diced mixed fruit and 1can of slice peaches located on a shelf identified for a</p>	F 371	<p>This is part of the opening and closing walk-through that is done on a daily basis.</p> <p>Persons responsible are account manager, assistant account manager, manager –in-training, diet aids and cooks.</p> <p>Target date is continuous effort.</p> <p>Update/Outcome/Date Resolved is to insure sanitation and cleanliness are kept up with on a day-to-day basis.</p> <p>Concerning steamer and place warmer:</p> <p>In-service the staff on the following:</p> <ul style="list-style-type: none"> • Instruct the cooks to change water in steamer after every meal. • Follow the cleaning matrix to ensure steamer and plate warmer stay clean. • Follow the daily cleaning assignments and ask for help when unable to accomplish. <p>This is part of the opening and closing walk-through that is done on a daily basis.</p> <p>Persons responsible are account manager, assistant account manager, manager-in-training, diet aids, and cooks.</p> <p>Target date is continuous effort.</p> <p>Update/Outcome/Date Resolved. is to insure sanitation and cleanliness are kept up with on a day-to-day basis.</p>	

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F 371	<p>Continued From page 6 cookout dated 4/29/14 in the dry storage area.</p> <p>During an interview on 4/28/14 at 8:05PM, the DMA and RD indicated that the dented cans should be returned to the vendor and removed from the general shelves of canned goods.</p> <p>5. During an observation on 4/28/14 at 7:40PM, there were 2 packages of 12 count hamburger buns that had expired on 3/15/14 stored with fresh bread in the dry storage area.</p> <p>During an interview on 4/28/14 at 8:05PM, the DMA and RD indicated that the bread should be checked upon delivery and the expired breads should be reported to vendor.</p> <p>6. During an observation on 4/28/14 at 7:40PM, there were 30 wet silver serving pans stacked on top one another on the dry storage shelf.</p> <p>During an interview on 4/28/14 at 8:05PM, the DMA and RD indicated that the pans should not be stacked wet and they should be separated to air dry.</p> <p>During a follow-up observation on 5/1/14 at 11:00AM, the dented cans had not been removed. The dietary manager indicated that cook was responsible for ensuring that the stock person checked refrigerator and dry storage for products that were dented, expired or spoiled prior to placement in these areas. The expired and dented items should be reported and returned to vendor. The kitchen equipment should be thoroughly cleaned before the end of the night shift and the dish room staff was responsible for ensuring the dishes/pans were not stacked or wet on top of one another. The pans</p>	F 371	<p>Concerning Dented Cans:</p> <p>Monitor all stock that comes in and separate dented cans from ready-to-use cans. Manager follows up on a day-to-day basis to ensure no dented cans are mixed with ready-to-use cans. In-service all staff on proper procedure when dented cans are discovered. The dented can check list will be used to monitor this.</p> <p>This is part of the opening and closing walk-through that is done on a daily basis.</p> <p>Persons responsible are account manager, assistant account manager, manager-in-training, diet aids, cooks and district manager.</p> <p>Target date is continuous effort.</p> <p>Update/Outcome/Date Resolved is to ensure no dented cans are mixed in with ready-to-use cans.</p> <p>Concerning labeling and dating:</p> <p>In-service the staff on the following:</p> <ul style="list-style-type: none"> Everything that is received needs a received date. Once a product is open it needs an open date. Following the time line of three days after the product is open. Make sure stock is rotated correctly. Have manger and district manager follow-up with sanitation inspections daily. 	

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F 371	Continued From page 7 should be air dried on the drying rack.	F 371	<p>This is part of the opening and closing walk-through that is done on a daily basis.</p> <p>Parties responsible are account manager, assistant account manager, manager-in-training, diet aids, cooks, and district manager.</p> <p>Target date is continuous effort.</p> <p>Update/Outcome/Date Resolved is to ensure products are labeled and dated so that no expired food is used/consumed.</p> <p>Concerning wet nesting:</p> <p>In-service the staff on the following:</p> <ul style="list-style-type: none"> • Proper way to stack dishes/pans • The importance of making sure no wet items go on shelves. • Letting dishes/pans air dry before putting them on the shelf. <p>This is part of the opening and closing walk-through that is done on a daily basis.</p> <p>Parties responsible are account manager, assistant account manager, manager-in-training, diet aids, cooks and district manager.</p> <p>Target date is continuous effort.</p> <p>Update/Outcome/Date Resolved is to ensure that wet nesting does not occur in the dietary department.</p>		