

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345341	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 05/01/2014
NAME OF PROVIDER OR SUPPLIER SILVER BLUFF INC			STREET ADDRESS, CITY, STATE, ZIP CODE 100 SILVER BLUFF DRIVE CANTON, NC 28716		
(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=F	<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 1) have adequate sanitizing solution in place in the three compartment sink and sanitizing buckets, 2) store ice scoops in a clean ice scoop holder, 3) seal food in dry storage to prevent contamination 4) clean containers used to store condiments and 5) discard expired ground turkey from refrigeration.</p> <p>The findings included:</p> <p>1. During the initial tour of the facility on 04/28/14 from 9:50 AM-10:25 AM a dietary aide was observed actively washing dishes utilizing the three compartment sink. Dishes were observed in the sanitizing solution in the third sink and dishes that had been washed/rinsed/sanitized in the three compartment sink were observed in an area designated for drying. The Food Service Director (FSD) was present at the observation and tested the sanitizing solution in the third sink. The FSD identified that quaternary chemical was the product utilized to sanitize dishware. Two separate tests were done by the FSD with the</p>	F 371	<p>The Silver Bluff QA team had already identified issues with the current management company in charge of the dietary services and notice of termination of services had been given on 3/20/2014 (prior to survey). Sodexo management contract will terminate on 5/29/2014 and Gallins Dining and Nutrition will assume management of all dietary services. We feel inadequate supervision and management were the reason these issues occurred and a change of management will resolve all issues and keep them from occurring again.</p> <p>Sanitizer: Manager called vendor to come immediately to repair the sanitizer dispenser. All staff were inserviced on proper way to dispense and test wash water for proper levels of sanitizer.</p> <p>Dry Storage: Chocolate chips were secured in plastic and condiment containers were cleaned. Staff were</p>	5/29/14	

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

TITLE

(X6) DATE

Electronically Signed

05/22/2014

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.

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

PRINTED: 05/30/2014
FORM APPROVED
OMB NO. 0938-0391

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F 371	<p>Continued From page 1</p> <p>manufacturer test strip to check the solution and resulted in a negligible amount of chemical solution on the test strip. Review of manufacturer recommendations identified 200 parts per million (PPM) as the minimum requirement of quaternary sanitizer when testing sanitizing solution. The FSD obtained new test strips and tested the sanitizing solution in use which showed the same result; a negligible amount of chemical solution on the test strip. The FSD demonstrated how the quaternary chemical was automatically diluted and dispensed from tubing which extended from the chemical container into the third compartment sink. After testing the sanitizing solution the FSD tested solution in two separate sanitizing buckets stored on shelving in the food preparation area that had been observed being utilized by staff to clean the surface of equipment in the kitchen. The FSD stated staff used the same quaternary chemical solution and filled the buckets from hosing leading into the third compartment sink. The FSD tested the solution in these two buckets and a negligible amount of quaternary sanitizer was identified on the test strip. The FSD emptied the liquid content in one of the buckets, refilled the bucket with the same tubing set up for sanitizing in the third sink and retested the solution. The same results were noted with a negligible amount of quaternary sanitizer as noted on the test strip. The FSD examined the tubing and dispensing unit inside the concentrated container of quaternary sanitizer. On 04/28/14 at 12:10 PM the FSD stated a malfunction in the pump inside the concentrated chemical solution was what prevented the quaternary solution from dispensing correctly.</p> <p>2. On 04/30/14 (Wednesday) from 11:00 AM-11:45 AM the following concerns were</p>	F 371	<p>inserviced on proper way to store and protect food from contamination.</p> <p>Ice Scoops: All but one scoop was eliminated from service. Ice scoop and ice scoop holder were washed and sanitized. All staff were inserviced on proper ways to store and clean ice scoop and ice scoop holder.</p> <p>Thawed Meat: The thawed ground meat was immediately thrown out. Cooks were immediately inserviced on proper storage and use of ground meat. All other staff and the cooks once again received inservice training on proper methods to thaw meat and time frames for using thawed meat.</p> <p>The training agenda included training as it relates to properly protecting food from contamination, proper thawing methods and time frames for using thawed products, proper methods of cleaning, sanitizing and storing ice scoops, and correct procedures for measuring and recording sanitizer concentration during ware washing.</p> <p>Food Service Director or designee will routinely monitor dietary documentation (at least 5x/week) as it relates to issues cited and will inspect all areas of the dietary department to ensure that compliance is maintained. The Food Services Director or designee will report results bi-weekly to QA committee including discussion of effectiveness of new monitoring systems. QA Committee</p>		

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F 371	<p>Continued From page 2 identified in the kitchen.</p> <p>a. A 25 pound opened cardboard box of chocolate chips was observed stored on shelving in the dry storage area. The lid to the box was open as well as the bag housing the chocolate chips; exposing the entire bag of chips to air. The Food Service Director (FSD) was present at the time and reported staff was expected to seal bags housing food products prior to storing on shelving in dry storage.</p> <p>b. Several plastic containers were observed on shelving in dry storage which were used to contain individual packets of condiments. The tops of four of these containers had a significant amount of dried food crumbs covering the majority of the surface area. Some of the crumbs had a sugar crystal appearance and feel. The FSD stated the aide that put up stock twice a week was expected to clean shelving as well as storage containers. The FSD stated the aide last worked on 4/28/14 (Monday) and it did not appear the tops of these four storage containers had been cleaned. In a follow-up interview on 5/1/14 at 11:20 AM the FSD stated the aide that put up stock didn't realize he was supposed to clean bins as part of his duties.</p> <p>b. Two ice scoops were observed stored in the metal ice scoop holder attached to the ice machine. The scoop portions were observed resting on the interior bottom portion of the ice scoop holder. The scoops were removed and a brown tinged substance was noted on the perforated interior bottom of the ice scoop holder. In the presence of the FSD the interior of the ice scoop holder was felt and a slimy brown substance was easily removed with little finger pressure. The FSD stated the ice scoops were</p>	F 371	will monitor compliance for at least 3 months to ensure corrective action is being sustained. Once it is established that corrective action is being sustained, the Food Services Director or designee will report to the QA Committee at least monthly, and as needed, on the status of dietary compliance will all State and Federal regulations.		

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F 371	Continued From page 3 cleaned daily but the ice scoop holder was not included on the kitchen cleaning schedule. 3. On 05/01/14 at 10:50 AM two open carts housing meats products were observed in the walk in refrigerator. A handwritten sticker on the visible front portion of the rack of trays indicated when the meat products were "pulled" and placed in refrigeration and when they should be "used by". One of the trays contained three, ten pound packages of thawed ground turkey. The label on the tray indicated the ground turkey was "pulled" and placed in the walk in refrigerator on "04/24" and had a "use by" date of "04/28". The Food Service Director (FSD) and kitchen supervisor were present at the time of the observation and could not explain why the ground turkey had not been discarded and remained available for use. The FSD and kitchen supervisor stated the turkey was delivered on 04/24/14. The FSD explained because of the amount of ground meat product used by the facility it was always just placed in the walk in refrigerator upon receipt. The FSD reviewed the menu that was in place the week after 04/24/14 and stated the ground turkey could have been used in a variety of items that were on the menu including chili for hot dogs, shepherd's pie and sloppy joe sandwiches. The FSD stated typically they utilize all the ground turkey before the use by date and could not explain why the three, ten pound packages had not been discarded after the "use by" date.	F 371			