

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

PRINTED: 06/09/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345250	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 05/19/2016
NAME OF PROVIDER OR SUPPLIER BRIAN CTR HLTH & RET/LINCOLNTON			STREET ADDRESS, CITY, STATE, ZIP CODE 515 S GENERALS BOULEVARD LINCOLNTON, NC 28093		
(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=F	<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 air dry 48 of 120 insulated domes and warmers before stacking and failed to ensure 18 of 85 kitchenware were free of dried food particles before storing.</p> <p>Findings included:</p> <p>A review of the facility policy entitled " Ware washing " with an effective date of May 2014 revealed the following:</p> <p>1) Policy: " It is the center policy that all dishware and service ware will be cleaned and sanitized after each use. "</p> <p>2) Action Steps: 4. " The Food Services Director ensures that all dishware is air dried and properly stored. "</p> <p>During observation of meal preparation on</p>	F 371	<p>" On 5-18-2016 the identified domes with moisture on the edge or inside of the lid was immediately removed from the line by the Food Service Director (FSD) to air dry. Identified plates, plate warmers and metal containers with any particles were immediately removed from the line and rewashed by the FSD and dietary aid on 5 -18-2016 . These observations were prior to the beginning of the service line to prepare/serve the resident trays and no wet domes or plates, plate warmers or metal containers with particles were used by any residents.</p> <p>" The FSD identified other residents with the potential to be affected by the alleged deficient practice by completing an immediate inspection on 5/18/2016 of any remaining domes, plates, plate</p>	6/16/16	

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

TITLE

(X6) DATE

Electronically Signed

06/09/2016

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>5/18/2016 at 11:25 am, an inspection of dishware was conducted with the Dietary Manager that revealed the following:</p> <ol style="list-style-type: none"> 1) 40 out of 90 insulated dome covers were stacked on top of each other with moisture on the edges and inside of the dome lids. 2) 15 out of 51 plates had dried food particles on the top. 3) 8 out of 30 plate warmers were stacked on top of each other with moisture on the inside. 4) 1 out of 30 plate warmers had dried food particles on the inside. 5) 1 out of 30 plate warmers had a small piece of bread stuck to the bottom. 6) 1 out of 4 metal containers stacked on top of each other had dried food particles underneath the edge of the container. <p>During an interview with the Dietary Manager at 12:00 pm, she stated that it was her expectation that dishware would be cleaned and air dried prior to stacking them for use or storage.</p> <p>A follow-up observation was conducted on 5/19/2016 with the Dietary Manager. Dishware was observed stacked on the service line ready to be used for the next meal preparation. Upon inspection of several plates, insulated dome lids and plate warmers, none were found to have moisture trapped between them or had dried food particles.</p> <p>During an interview with the Administrator on 5/19/2016 at 9:35 am, she stated that it was her expectation that dishware would be cleaned and air dried prior to stacking them for use or storage.</p>	F 371	<p>warmers and metal containers on 5-18-2016. No wetness or particles were identified on any other dishes.</p> <p>" Measures put in place to ensure that the alleged deficient practice does not recur include: Dietary staff was educated by the FSD on 5-18-2016, 5-19-2016 and 5-26-2016, on the proper drying of dome lids and cleaning of plates, plate warmers and metal containers. The FSD or Cook will conduct daily audits for each meal of domes, plates, plate warmers and metal containers for wetness or dried particles for 4 weeks then one time a day for 90 days. Results will be recorded on a Daily Dietary Checklist by the FSD or cook. Any identified items with wetness or dried particles will be removed for the serving line by the cook and staff counseled and re-educated by the FSD.</p> <p>" On or before 5-16-16, the Administrator and FSD will evaluate the Daily Dietary Checklist in the monthly QAPI meeting to monitor the effectiveness of the above action plan for sanitation beginning for 3 months and will adjust the plan as indicated in the QAPI meeting monthly.</p>		