

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

PRINTED: 05/13/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345001	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 03/11/2021
NAME OF PROVIDER OR SUPPLIER HILLCREST CONVALESCENT CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1417 W PETTIGREW STREET DURHAM, NC 27705		
(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	
E 000	Initial Comments	E 000			
F 000	An unannounced Recertification survey and complaint investigation was conducted on 03/08/21 through 03/11/21 The facility was found in compliance with the requirement CFR 483.73, Emergency Preparedness. Event ID # CIO111 INITIAL COMMENTS	F 000			
F 812 SS=E	A recertification and complaint investigation survey was conducted from 03/08/21 through 03/11/21. Event ID# CIO111. 14 of the 14 complaint allegations were unsubstantiated. Food Procurement,Store/Prepare/Serve-Sanitary CFR(s): 483.60(i)(1)(2) §483.60(i) Food safety requirements. The facility must - §483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities. (i) This may include food items obtained directly from local producers, subject to applicable State and local laws or regulations. (ii) This provision does not prohibit or prevent facilities from using produce grown in facility gardens, subject to compliance with applicable safe growing and food-handling practices. (iii) This provision does not preclude residents from consuming foods not procured by the facility. §483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety. This REQUIREMENT is not met as evidenced by: Based on observations, staff interviews and	F 812	This plan of correction constitutes	4/8/21	

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

TITLE

(X6) DATE

Electronically Signed

04/05/2021

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 812	<p>Continued From page 1</p> <p>record review, the facility failed to ensure the following kitchen equipment was clean; the stove, oven, hot box, steam table, plate warmer, plate/dome rack, 2 refrigerators, ice machine and dry storage containers.</p> <p>Findings included:</p> <p>During the initial kitchen tour was conducted on 3/8/21 at 9:30 AM, the following observations were made: The stove had a large volume of heavy buildup of grease on the stove burners, walls and fronts of the stove. There were large amounts of burnt foods, dried liquid encrusted and splatters throughout the stove area.</p> <p>B. During an observation on 3/8/21 at 9:30 AM, the oven had a large volume greasy buildup, dried food and liquids on the inside and outside. The grease buildup was encrusted on doors/shelves where foods were being cooked. There was a large volume of dried grease buildup observed on the fronts of the ovens and on the walls.</p> <p>C. During an observation on 3/8/21 at 9:30 AM, the hot box where warm food is stored, had large volume of dried brown/yellow liquids matter encrusted on edges inside/outside.</p> <p>D. During an observation on 3/8/21 at 9:30 AM, the 5 compartment steam tables had floating food particles in standing water, the lids of the steam table had large volumes of dried food and greasy build up around edges.</p> <p>E. During an observation on 3/8/21 at 9:30 AM, the two-compartment plate warmer had two rows of clean plates stored in them. The inside and outside had dried food particles and liquids spills,</p>	F 812	<p>Hillcrest Convalescent Center's written allegation of compliance for the deficiency cited. However, submission of the Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. This Plan of Correction is submitted to meet requirements established by state and federal law.</p> <p>[F 812] It is the policy of Hillcrest Convalescent Center (Hillcrest) to comply with the food safety and sanitation guidelines as outlined in the FDA Food Code, CMS, and the North Carolina Health Department.</p> <p>The Administrator conducted a thorough inspection of the kitchen and all kitchen appliances after March 8, 10 am, while the Survey was still ongoing and on March 11, 2021 immediately following the Survey, and none of the concerns noted in the Survey or any other concerns were identified. Hillcrest attests, and the lack of any of other documentation in this Summary Statement/Survey makes clear, that the areas mentioned in the Survey were clean during subsequent inspections throughout the remainder of the four-day, on-site survey. It is also important to note that the Surveyor's inspection on the first day took place after breakfast but before the pre-lunch cleaning was concluded. For example, the pre-lunch cleaning of the steam table begins around 10:15 am every day. Hillcrest also contends that the reference to steam table lids with dried food and greasy build up is in error. Hillcrest does not have 5 compartment</p>		

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F 812	<p>Continued From page 2</p> <p>old food crumbs all around. The staff removed the plates wiped down the top and returned the clean plates to the warmer. Other dried food particles and liquids remained inside the plate warmer.</p> <p>F. During an observation on 3/8/21 at 9:30 AM, there were two plate/dome racks with dome lids/plates had large amounts of leftover food, yellow, brown crumbs dried liquids were the clean domes/lids were drying.</p> <p>G. During an observation on 3/8/21 at 9:30 AM, the ice machine had brown matter and a black substance inside the creases of the hood the ice machine.</p> <p>H During an observation on 3/8/21 at 9:30 AM, the floors under and behind the stoves/ovens, steam table, prep tables, under ice machine, had a large thick heavy buildup of grease, brown matter, trash, paper cups, straws, spoons, food, wrappers.</p> <p>I. During an observation on 3/8/21 at 9:40 AM, there were 6 dry food containers in the dry storage room labelled breadcrumbs, seafood, cornmeal and cereal had open dried food/liquids brown matter on inside and outside of containers. The containers located in the kitchen area labelled sugar and thickener containers had dry brown liquids/food inside and outside of the containers.</p> <p>J. During an observation on 3/8/21 at 9:45AM, 5 drying carts used for clean dishes were observed to have dried encrusted food/liquid matter on them with stacks of clean cups/glasses and bowls.</p>	F 812	<p>steam tables and the Registered Dietician specifically checked the steam table lids just prior to the survey and there was no dried food or greasy build up around the edges. Additionally, there was no food particles in the standing water in the steam table.</p> <p>The Dietary department will be in-serviced by the Certified Dietary Manager (CDM) and/or the Registered Dietician (RD) on the results of the Survey and the information included in this plan of correction no later than April 8, 2021.</p> <p>Dietary department staff will also be retrained by the CDM and/or the RD on the processes and importance of cleaning the items referenced in the Survey before each meal. A focus of the in-service and training will be to check areas referenced in the Survey for potential buildup. Cleaning task lists/cleaning schedules utilized by Dietary department staff have been revised to address the specific allegations set forth in the Survey.</p> <p>The CDM or her designee are supervising the daily cleaning before the beginning of each meal to ensure the thoroughness of the cleaning. Results of their inspections will be documented on a spreadsheet. Daily inspections will continue three times a day until there are five consecutive days in which all three inspections indicate no issues of concern. Inspections will then continue unannounced on a weekly basis.</p> <p>The RD or her designee is conducting</p>		

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F 812	Continued From page 3 K. During an observation on 3/8/21 at 9:50 AM there were two refrigerators that had encrusted brown matter dried foods and liquids and opened left over foods of sandwiches, fruit cups and breakfast foods that were not covered. During an interview on 3/11/21 at 11:10 AM, Dietary Aide #1 and Dietary Aide #2 stated they were informed of the kitchen checklist and the requirements of the cleaning process and when to clean kitchen equipment. The Dietary Aides stated they were cleaning the equipment in accordance to the weekly cleaning schedule. During an interview on 3/11/21 at 11:21 AM, the Dietary Manger (DM) stated the expectation was for the kitchen staff to follow the kitchen cleaning checklist. DM stated the 3 supervisors were responsible for ensuring the kitchen team to maintained sanitation conditions in the kitchen. The supervisors should be doing shift checks before and after to ensure all tasks were completed. During an interview on 3/11/21 at 11:30 AM, the Kitchen Supervisor stated she was responsible for monitoring and checking behind the kitchen staff to ensure they were completing the checklist and ensuring all sanitation procedures were being followed. The Supervisor stated they had been checking behind the staff weekly to ensure the cleaning was done.	F 812	weekly, unannounced inspections using a Hazard Surveillance form, which has been updated by the RD and identifies specific areas for inspection. Weekly inspections will continue until three consecutive inspections indicate no issues of concern and then the process will continue on a monthly unannounced basis. As an additional quality initiative beyond regular county health inspections and DHSR surveys, Hillcrest has for some time contracted with an outside consultant service to audit the food safety of the kitchen and Dietary department. Although this process has been suspended due to COVID-19 concerns from this consultant, it is our expectation this optional process will be re-implemented to assist with compliance within the upcoming months. Once re-implemented, this consultant will receive a copy of the Survey and continue to make quarterly, unannounced reviews of the kitchen and the Dietary Department including the kitchen appliances and areas of the kitchen referenced in the Survey. This plan of correction will be reviewed in the next regularly scheduled Quality Assurance and Assessment meeting. The dates for random inspection are subject to the review of the Quality Assurance committee. The documentation of completed inspections by the Certified Dietary Manager or her designee and the Registered Dietitian or her designee will be provided to Quality Assurance committee, to ensure		

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