

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345326	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/16/2014
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NAME OF PROVIDER OR SUPPLIER WILLOWBROOKE COURT SC CTR AT PLANTATION ESTATES	STREET ADDRESS, CITY, STATE, ZIP CODE 701 PLANTATION ESTATES DRIVE MATTHEWS, NC 28105
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F 371 SS=D	<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, staff interviews and review of facility records, the facility failed to maintain 1) potentially hazardous refrigerated foods (salami, cheese and milk) within the use-by-date or manufacturer expiration date, 2) store frozen fish in a closed container and 3) serve foods using clean utensils to three (3) sampled residents (Residents #4, 6 and 36).</p> <p>The findings included:</p> <p>1. Review of the facility document "Guide to Proper Food Storage Techniques", dated August 2010, recorded in part, "Proper food handling and storage techniques must be followed to prevent contamination and pathogen (bacteria) growth. All food items outside of the original container must be covered, labeled and dated. Expiration dates should be checked on a regular basis."</p> <p>Observations in the facility's kitchen on 04/14/14 from 09:00 AM until 09:11 AM revealed the following problems with foods stored in refrigerator and freezer units.</p>	F 371	<p>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the providers of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared solely as matter of compliance with federal and state law.</p> <p>F371</p> <p>Potentially hazardous refrigerated foods and the frozen fish were discarded.</p> <p>Culinary staff were reeducated on food labeling and dating policies.</p> <p>A monitoring tool will be utilized three times a day to check for compliance. The inventory clerk/designee will complete a walk thru of coolers and freezers in the</p>	5/14/14
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 05/09/2014
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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	Continued From page 1 An observation of refrigerator #2 and the freezer unit revealed foods and milk stored past the facility use-by or manufacturer expiration date. The items included: <ul style="list-style-type: none"> · A pre-opened package containing 16 slices of American cheese, re-packaged in plastic wrap with a facility label which recorded a use by date of 04/12/14 · A pre-opened package of approximately 1 pound of salami, re-packaged in plastic wrap, with a facility label which recorded a use by date of 04/13/14 · Sixteen pint sized cartons of whole fat milk with a manufacturer expiration date stamp of 04/11/14 · A 10 pound box of rainbow trout, stored open with the fish exposed to the 0 degree air of the freezer; the fish had formed ice crystals on its exterior <p>An interview with the culinary foodservice director (CFD) on 04/14/14 at 09:00 AM revealed that dietary staff #1 and cooks were responsible for checking refrigeration units and the freezer daily. The CFD stated that expired food items should have been discarded and the rainbow trout should be have stored in a closed package.</p> <p>An interview with dietary staff #1 on 04/14/14 at 09:13 AM revealed he was responsible for receiving and stocking inventory. Dietary staff #1 stated he checked the refrigerator units and freezer daily for expired items. Dietary staff #1 further stated that he had already completed his morning check of the refrigerators, but missed the cheese, salami and milk. Dietary staff #1 also stated he last check the freezer on Friday (04/11/14), but could not explain the opened box</p>	F 371	<p>morning and document and potentially hazardous food items that are out of date or need to be discarded and document corrective action.</p> <p>At the end of the shift, the morning cooks/designee will complete a walk thru of the coolers and freezers and document any potentially hazardous food items that are out of date or need to be discarded and document corrective actions.</p> <p>The Chef/Kitchen Supervisor, prior to closing for the night will complete a walk thru of the coolers and freezers and document any potentially hazardous food items that are out of date or need to be discarded and document corrective actions.</p> <p>Culinary Services Director/Designee will complete weekly audits to monitor compliance for 6 weeks, then will complete monthly for 11 months. Results will be reported to the Quarterly Quality Assurance Committee for compliance and/or revisions.</p> <p>Culinary staff were reeducated on single use glove usage policy.</p> <p>Nutrition Services Manager/</p>		

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F 371	<p>Continued From page 2 of rainbow trout.</p> <p>2. Review of the facility policy, "Single-Use Glove Usage", revised December 2007, recorded in part, "Glove usage does not replace the need for good hand washing practices. Hands will be washed after touching your face, hair or shoes and when soiling hands."</p> <p>An observation of the lunch meal tray line occurred on 04/15/14 from 11:33 AM to 12:09 PM. During this observation dietary staff #2 was observed wearing gloves. At 11:48 AM, dietary staff #2 was observed to use her gloved hands to pick up a visibly soiled box of plastic wrap. The exterior of the box of plastic wrap was soiled with stains of oil and food debris. Dietary staff #2 continued the lunch meal tray line by plating slices of pumpernickel bread with her gloved hands for Residents #4 and 36. On 04/15/14 at 12:09 PM, dietary staff #2 was observed to touch the same box of plastic wrap twice. Dietary staff #2 then wiped her face using the left shoulder area of her shirt, repositioned the left shoulder area of her shirt with her left gloved hand and then rubbed both gloved hands together. Dietary staff #2 continued the lunch meal tray line without donning new gloves or performing hand hygiene. At 12:10 PM, dietary staff #2 plated pumpernickel bread for Resident #6 using her right gloved hand. Dietary staff #2 did not don new gloves or perform hand hygiene between tasks during the lunch meal tray line.</p> <p>An interview on 04/16/14 at 1:39 PM with dietary staff #2 revealed she supervised the 1st shift tray line. Dietary staff #2 stated she was trained to wash her hands upon coming to work, at the start</p>	F 371	<p>Designee will monitor compliance by observation and with an audit tool weekly for 12 weeks then monthly for 11 months.</p> <p>Culinary Services Director/Designee will report findings to the Quarterly Quality Assurance Committee for compliance and/or revisions.</p>		

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

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F 371	<p>Continued From page 3</p> <p>of the tray line and during the tray line if her hands/gloves became soiled. Dietary staff #2 recalled that she did not don new gloves or perform hand hygiene after handling the soiled box of plastic wrap. Dietary staff #2 observed the box of plastic wrap and stated that it was visibly soiled with grease/food stains. Dietary staff #2 further stated that she should have donned new gloves and performed hand hygiene when she touched her shirt after wiping her face onto her shirt. She further stated it was her typical practice to plate bread/sandwiches with gloved hands rather than utensils to keep the bread/sandwiches from breaking apart.</p> <p>An interview on 04/16/14 at 1:57 PM with the nutrition services manager (NSM) revealed she oversaw the tray line. The NSM stated she was present during the lunch meal tray line on 04/15/14 and noticed dietary staff #2 handle the soiled box of plastic wrap, but did not remind dietary staff #2 to change gloves or wash her hands. The NSM stated that dietary staff should change gloves and wash hands during the tray line service if gloves became soiled before touching food served to residents.</p>	F 371			