




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

PRINTED: 03/14/2013  
FORM APPROVED  
OMB NO. 0938-0391

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION              |  | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>345544</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br><br>B. WING _____   |                      | (X3) DATE SURVEY COMPLETED<br><br><b>C</b><br><br><b>03/01/2013</b>                   |
|---|--|---|--|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER<br><br><b>ASBURY CARE CENTER</b> |  |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>3625 WILLARD FARROW DR<br/>CHARLOTTE, NC 28215</b>   |                      |   |
| (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 363   | Continued From page 1<br>that a sufficient supply of one half cup serving utensils was not available and therefore she used a quarter cup serving utensil for the coleslaw instead.<br><br>The second floor lunch meal tray line was observed in progress on 02/28/13 at 12:40 PM. A one quarter cup serving utensil was observed in the stainless steel pan of coleslaw on the tray line.<br><br>Dietary staff #2 was interviewed on 02/28/13 at 12:40 PM. During the interview dietary staff #2 stated that she used the menu spreadsheet as guidance for serving the correct portion size during meals. Dietary staff #2 also stated that a one quarter cup serving utensil was usually used to serve cold salads like pasta salad, coleslaw, and three bean salad; she further stated "That's what I was told to do." Dietary staff #2 stated, she had already served one quarter cup of coleslaw to a resident during the lunch meal, but did not remember to whom. An observation of serving utensils in the kitchen with Dietary staff #2 revealed there were five half cup serving utensils available for use in the kitchen. Dietary staff #2 stated during the observation that she assisted in gathering utensils for the lunch meal on 02/28/13 and did not realize that additional one half cup serving utensils were available. Dietary staff #1 further stated "I must have picked up the wrong size serving utensil."<br><br>An interview on 02/28/13 at 12:48 PM with the nutrition services manager revealed she had previously noticed that dietary staff were using the incorrect size serving utensils at times, she in-serviced staff and since then tried to complete | F 363   | <u>F363 continued</u><br>On or before 3/28/13, all dietary staff to be in-serviced on utilizing the revised Serving Utensils sheet as a tool. This in-service will also cover the utensils and equivalent cup and ounce amounts.<br><br>Effective 3/28/13, Dietary Director/ Designee to conduct weekly audits of serving utensil sizes during meal service. These audits will be conducted once per week X 3 months, then monthly for an additional 3 months.<br><br>Effective 3/28/13, all audits related to utensil sizes will be reviewed at monthly QA meetings. This will be conducted monthly X 6 months. | 3.28.13              | 3.28.13   |
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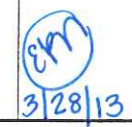
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| F 367   | Continued From page 3<br><br>Review of a Speech Therapy note dated 02/13/13 revealed Resident #31 required a mechanical soft textured diet with thin liquids. The Speech Therapist documented Resident #31 required a mechanically soft diet with ground meats and soft regular textures to form a cohesive bolus for swallowing.<br><br>Review of the therapeutic spreadsheet for the lunch meal to be served on 02/28/13 revealed residents on a mechanical soft diet were to be served ground chicken.<br><br>Observation on 02/28/13 at 12:26 PM revealed Resident #31, whose right arm was in a brace, received a lunch meal of one piece of crispy baked chicken, gravy, rice pilaf, iced tea and milkshake. Review of the dietary slip on Resident #31's lunch tray revealed direction for a mechanical soft diet with chopped meat. Nurse Aide (NA) #1 cut up the chicken into approximately one half inch pieces.<br><br>Interview with Resident #31 on 02/28/13 at 12:43 PM revealed the meat served was either in one piece or chopped. Resident #31 explained her swallowing was poor and the staff would cut up the meat if served whole. Resident #31 reported she swallowed the cut up chicken without difficulty.<br><br>Interview with Nurse Aide (NA) #1 on 02/28/13 at 12:29 PM revealed Resident #31 would receive either a whole or chopped meat. NA #1 explained she assisted Resident #31 with cutting up her meat since Resident #31 could not use her right arm. | F 367   | <b>F367 continued</b><br>This new policy and procedure will include several new steps, including:<br><br>(1) Prior to delivery and meal service of each meal, the lead production employee will hold a pre-service meeting with dietary staff. At this meeting, the lead production employee will review the menu for that meal, and the proper consistency of all menu items being served for each therapeutic/modified diet being served;<br><br>2) During meal service, the lead production employee will review each resident tray to check for the appropriate therapeutic/modified diet;<br><br>3) During meal service and delivery, as second check, the staff member carrying the meal/meal tray to the resident will review the resident tray and check for appropriate diet, to ensure that plated food matches ordered diet. ( A copy of this new policy and procedure is included).<br><br>On or before 3/28/13, all dietary and nursing staff to be in-serviced on new serving Therapeutic and Modified Diets Policy and Procedure.<br><br>On or before 3/28/13, all dietary staff to be in-serviced on utilizing the therapeutic spreadsheets as a tool. These spreadsheets are kept in a notebook, on each floor of the facility, near the serving steam table. | 3.28.13<br><br>3.28.13<br><br>3.28.13 |  |

*EM* 3/28/13

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| F 367   | Continued From page 4<br><br>Interview with the Dietary Supervisor on 02/28/13 at 1:15 PM revealed Resident #31 should receive ground chicken. The Dietary Supervisor reported she checked all trays after plating but missed Resident #31's whole piece of chicken. The Dietary Supervisor reported she did not know if Resident #31 could receive chopped meat but the meal should be either ground or chopped.<br><br>Interview with the Nutrition Services Manager (DSM) on 02/28/13 at 3:07 PM revealed Resident #31 alternated between ground and chopped meats on the mechanical soft diet. The DSM reported dietary staff should serve Resident #31's meat either in chopped or ground form.<br><br>Interview with the Speech Therapist (ST) on 02/28/13 at 3:13 PM revealed Resident #31 alternated between ground and chopped meats for safe swallowing. The ST reported Resident #31 should not be served a whole piece of meat. | F 367   | <b>F367 Continued</b><br>Effective 3/28/13, Dietary Director/Designee to conduct weekly audits of checking resident meal trays for appropriate therapeutic/modified diets during meal service. These audits will be conducted once per week X 3 months, then monthly for an additional 3 months.<br><br>Effective 3/28/13, all audits related to therapeutic/modified diets will be reviewed at monthly QA meetings. This will be conducted monthly X 6 months. | 3.28.13<br><br>3.28.13 |   |
| F 371<br>SS=D   | 483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY<br><br>The facility must -<br>(1) Procure food from sources approved or considered satisfactory by Federal, State or local authorities; and<br>(2) Store, prepare, distribute and serve food under sanitary conditions<br><br>This REQUIREMENT is not met as evidenced by:   | F 371   | <b>F371</b><br>On 2/26/13 to ensure that residents are no longer at risk, Dietary Director/ Designee discarded expired nutritional supplements.<br><br>On 2/26/13, to ensure that residents are no longer at risk, Dietary Aide/designee checked all main kitchen coolers for any expired supplements, foods or beverages.<br><br>On or before 3/22/13, Dietary Director/ Designee created a focus team for food storage and monitoring of inventory.           | 2.26.13<br><br>2.26.13 |  |

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| F 371   | <p>Continued From page 5</p> <p>Based on an observation and staff interviews, 16 high calorie nutritional supplements were stored under refrigeration past the date of manufacturer expiration for 1 of 3 refrigeration units.</p> <p>Findings included:</p> <p>An observation of the walk-un refrigerator occurred on 02/26/13 at 09:06 AM. The walk-in refrigerator was observed with 16 containers (8 ounces each) of a high calorie nutritional supplement with a manufacturer expiration date stamp of 02/15/13.</p> <p>Dietary staff #3 was interviewed on 02/28/13 at 09:07 AM and stated she was responsible for monitoring the refrigeration units for expired items. Dietary staff #2 also stated that a transition was made in January 2013 to the use of a different high calorie house supplement. Dietary staff #3 further stated that the remaining unused supplements were placed in storage in the walk-in refrigerator in the event of a specific resident request or physician's order. Dietary staff #2 stated she had placed a few of the supplements in the nourishment refrigerators on the first and second floors, but missed these expired nutritional supplements.</p> <p>Interview on 02/28/13 at 09:08 AM with the culinary food service director revealed all expired items should have been discarded.</p> <p>An interview on 03/01/13 at 2:20 PM with the nutrition services manager revealed that dietary staff #3 was responsible for stocking nourishment refrigerators on the units with nutritional supplements and checking dates for expiration.</p> | F 371   | <p><b>F371 Continued</b></p> <p>This team consists of 2 Dietary Aides and Utility Storage Personnel. This team is responsible for ensuring that daily checks of all main kitchen coolers are conducted, and any expired items are discarded immediately. The daily checks of coolers will be documented on logs.</p> <p>On or before 3/28/13, the Food Storage Policy and Procedure will be revised. A new step will be added to the policy and procedure, which states, "Daily checks of all coolers/refrigerators must be conducted. Any items that have reached their expiration date must be immediately discarded." (A copy of this revised policy and procedure is included.)</p> <p>On or before 3/28/13, all dietary staff to be in-serviced on revised Food Storage Policy and Procedure.</p> <p>Effective 3/28/13, Consultant Dietician/ Designee to conduct bi-monthly audits of main kitchen coolers. These audits will be conducted 2 times per month X 3 months.</p> <p>Effective 3/28/13, Dietary Director/ Designee to conduct bi-monthly audits of main kitchen coolers. These audits will be conducted 2 times per month X 3 months, then monthly thereafter.</p> <p>Effective 3/28/13, all audits related to cooler inspections will be reviewed at monthly QA meetings. This will be conducted monthly X 6 months.</p> | <p>3.22.13</p> <p>3.28.13</p> <p>3.28.13</p> <p>3.28.13</p> <p>3.28.13</p> <p>3.28.13</p> |   |

*(Handwritten initials)*  
**3/28/13**

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|-------|---|-------|--|--|
| F 371 | Continued From page 6<br>The nutrition services manager stated the 16 nutritional supplements with a manufacturer expiration date stamp of 02/15/13 were the prior nourishments used before the facility changed to a different house supplement. The nutritional services manager stated the prior supplements were kept in case of a resident request or specific physician's order, but should have been discarded once expired. | F 371 |  |  |
|-------|---|-------|--|--|

*cm*  
3/28/13

## COPIES OF:

- Revised Policy for Food Storage
- New Policy for Serving Therapeutic and Modified Diets
- Revised Policy for Portion Control
- Serving Utensils Tool



## FOOD STORAGE

### POLICY:

Sufficient storage facilities are provided to keep foods safe, wholesome, and appetizing. Food is stored, prepared, and transported at appropriate temperatures and by methods designed to prevent contamination.

### PROCEDURE:

1. Dry storage rooms must be well ventilated. All storage areas should have adequate illumination with humidity controls to prevent condensation of moisture and growth of molds.
2. Storage rooms must have only one access door. If the storage room has more than one door, only one door will be used. All other doors must be locked and their use prohibited. Secure locks must be installed on all other doors and windows. The keys to storage rooms shall be controlled by the food service manager.
3. Food items will be stored on shelves, with heavier and bulkier items stored on lower shelves.
4. Plastic containers with tight-fitting covers must be used for storing cereals, cereal products, flour, sugar, dried vegetables, and broken lots of bulk foods. All containers must be legible and accurately labeled.
5. Chemicals must be clearly labeled, kept in original containers when possible, and kept in a locked area way from food.
6. Scoops must be provided for sugar, flour, dried vegetables, and spices. Scoops are not to be stored in food or ice containers, but are kept covered in a protected area near the containers. Scoops are to be washed and sanitized on a weekly basis or as needed.
7. Hands must be washed after unloading supplies and prior to handling food items.
8. All stock must be rotated with each new order received. Rotating stock is essential to ensure the freshness and highest quality of all foods.
  - a. Old stock is always used first (first in – first out method).
  - b. Supervise the person designated to put stock away to make sure it is rotated properly.
  - c. Food should be dated as it is placed on the shelves.
  - d. Date marking to indicate the date or day by which a ready-to-eat, potentially hazardous food should be consumed, sold, or discarded will be visible on all high risk food.
9. Daily checks of all coolers/refrigerators must be conducted. Any items that have reached their expiration date must be immediately discarded.
10. Food is purchased in quantities that can be stored properly.
11. Food is arranged in food groups in the storage areas to make it easier to store, locate, and inventory.
12. Food is stored a minimum of 6 inches above the floor and 18 inches from the ceiling on clean racks or other clean surfaces, and is protected from splash, overhead pipes, or other contamination.

## **Healthcare and Dietary Policies and Procedures**

### **Title: Serving Therapeutic and Modified Diets**

#### **Policy:**

Food is served in the appropriate consistency, for the therapeutic/modified diet that is ordered/appropriate for the resident.

#### **Procedure:**

- 1) Prior to delivery and meal service of each meal, the lead production employee will hold a pre-service meeting with dietary staff. At this meeting, the lead production employee will review the menu for that meal, and the proper consistency of all menu items being served for each therapeutic/modified diet being served.
- 2) During meal service, the lead production employee will review each resident tray to check for the appropriate therapeutic/modified diet.
- 3) During meal service and delivery, as second check, the staff member carrying the meal/meal tray to the resident will review the resident tray and check for appropriate diet, to ensure that plated food matches ordered diet.
- 4) Therapeutic spreadsheets will be kept at each serving steam table. These will be utilized as a staff resource and tool.
- 5) Periodic on-going in-services will be conducted to help ensure on-going compliance with policy and procedure.

## PORTION CONTROL

### POLICY:

Individuals will receive the appropriate portions of food as planned on the menu. Control at the point of service is necessary to assure that only the standard portion is served.

### PROCEDURE:

1. Use standardized recipes to avoid waste caused by overproduction. Recipes should be adjusted as needed and the yield and serving size specified on each recipe.
2. The menu should list the specific portion size for each food item. Menus should be posted at the tray line for staff to refer to for proper portioning of servings for each diet.
3. Serve the food with ladles, scoops, spoodles and spoons of standard sizes. Scales should be used as needed to weigh meat portions. Scoops should be leveled off (not overflowing) for the most accurate portion size.
  - Portions that are too small result in the individual not receiving the nutrients needed. Portions that are too large increase the costs as well as providing the individual more food than needed or allowed (in the case of special diets).
4. The lead production individual at each serving steam table, during meal service, must check the scoop/spoon size and verify that it is correct.
5. Food service staff will be inserviced by the food service manager on proper portion sizes at regular intervals. Meal observations for quality control of portion sizes should be conducted by the food service manager or RD/DTR on a routine basis.

| SERVING UTENSILS |            |                      |
|------------------|------------|----------------------|
| UTENSILS         | CUP AMOUNT | OUNCE AMOUNT         |
| # 6 s            | 2/3 cup    | 5.34 ounces          |
| # 8 s            | 1/2 cup    | 4 ounces             |
| # 10 s           | 3/8 cup    | 3-4 ounces           |
| # 12 s           | 1/3 cup    | 2.67 ounces          |
| # 16 s           | 1/4 cup    | 2 ounces             |
| # 20 s           | 3 1/8 Tbs. | 1 3/4 - 2 ounces     |
| # 24 s           | 2 2/3 Tbs. | 1 1/2 – 1 3/4 ounces |
| # 40 s           | 1 1/2 Tbs. | 3/4 ounce            |
| 6 ounce ladle    | 3/4 cup    | 6 ounces             |

## SERVING UTENSILS

| UTENSILS      | CUP AMOUNT           | OUNCE AMOUNT                             |
|---------------|----------------------|--|
| # 6 s         | $\frac{2}{3}$ cup    | 5.34 ounces                              |
| # 8 s         | $\frac{1}{2}$ cup    | 4 ounces                                 |
| # 10 s        | $\frac{3}{8}$ cup    | 3-4 ounces                               |
| # 12 s        | $\frac{1}{3}$ cup    | 2.67 ounces                              |
| # 16 s        | $\frac{1}{4}$ cup    | 2 ounces                                 |
| # 20 s        | 3 $\frac{1}{8}$ Tbs. | 1 $\frac{3}{4}$ - 2 ounces               |
| # 24 s        | 2 $\frac{2}{3}$ Tbs. | 1 $\frac{1}{2}$ - 1 $\frac{3}{4}$ ounces |
| # 40 s        | 1 $\frac{1}{2}$ Tbs. | $\frac{3}{4}$ ounces                     |
| 6 ounce ladle | $\frac{3}{4}$ cup    | 6 ounces                                 |