

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

PRINTED: 06/07/2013  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345096</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/23/2013</b>
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NAME OF PROVIDER OR SUPPLIER  <b>HUNTERSVILLE OAKS</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>12019 VERHOEFF DRIVE HUNTERSVILLE, NC 28078</b>
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F 363 SS=D	<p><b>483.35(c) MENUS MEET RES NEEDS/PREP IN ADVANCE/FOLLOWED</b></p> <p>Menus must meet the nutritional needs of residents in accordance with the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences; be prepared in advance; and be followed.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations, staff interviews and review of facility menus, the facility failed to serve four ounce portions of scrambled eggs (Residents #231, 26, 20, 248, 2, 24, 218, 221 and 356) and grits (Residents # 76, 174, 26, 20, 94, 248, 2, 122, 24, 264, 271, 56, 218, 221, 356, 266, 166, 114, 41, 103, 152, 84, 228, 170, 46, and 201) according to the menu for 2 of 4 meals observed.</p> <p>The findings included:</p> <p>The following concerns with portion sizes were observed during breakfast meal tray line observations on 05/22/13 and 05/23/13.</p> <p>a. The breakfast meal tray line was observed on 05/22/13 in the Pine Bluff dining area. The breakfast menu included grits and eggs to be served in 4 ounce portions each. On 05/22/13 from 08:05 AM to 08:35 environment services staff #1 (EVS #1) served a 3 ounce portion of grits and eggs to the following:</p> <ul style="list-style-type: none"> <li>· Grits: Residents #76, 174, 26, 20, 94, 248, 2, 122, 24, 264, 271, 56, 218, 221 and 356</li> <li>· Scrambled Eggs: Residents #231, 26, 20,</li> </ul>	F 363	<p>Preparation and/or execution of this Plan of Correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in this statement of deficiencies. The Plan of Correction is prepared and/or executed solely because it is required by the provisions of Federal and State law.</p> <p>F 363</p> <p>To ensure nutritional needs are met, nutritional reassessments were completed for the following residents:</p> <p>Resident #2, 20, 24, 26, 41, 46, 56, 76, 84, 94, 103, 114, 122, 152, 166, 170, 174, 201, 218, 221, 228, 231, 248, 264, 266, 271, 356.</p> <p>Based on the serving size of items on the menu, the Food &amp; Nutrition Services Director, ordered twenty-four of the 4 ounce scoops and sixteen of the 4 ounce spoodles.</p> <p>The scoops &amp; spoodles will now be delivered with the meal cart at meal time to ensure the appropriate utensil is being used for each item, in accordance with the menu.</p> <p>In addition to the menu review during the daily line up meeting in the main kitchen, production staff will now include a review of the serving utensils for each item. Production staff educated on the new serving utensils and the process change.</p>	
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

*[Signature]* MHA, NHA Administrator 6-13-13

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 363	<p>Continued From page 1 248, 2, 24, 218, 221 and 356</p> <p>b. The breakfast meal tray line was observed on 05/23/13 in the Maple Knoll dining area. The breakfast menu included grits to be served in a 4 ounce portion. On 05/23/13 from 08:05 AM to 08:15 AM EVS #2 served a 3 ounce portion of grits to Residents #266, 166, 114, 41, 103, 152, 84, 228, 170, 46, and 201.</p> <p>c. The breakfast meal tray line was observed on 05/23/13 in the Pine Bluff dining area. The breakfast menu included grits to be served in a 4 ounce portion. On 05/23/13 from 08:18 AM to 08:30 AM EVS #1 served a 3 ounce portion of grits to Residents #76, 174, 26, 94, 248, 24, 264, 271, 218, 221 and 356.</p> <p>During an interview on 05/23/13 at 08:35 AM with the Food and Nutrition Services Director (FNSD), she confirmed that residents should be served a 4 ounce portion of grits and scrambled eggs according to the menu. The FNSD further stated that serving utensils were available in each neighborhood kitchen and that staff had a serving guide they used to know what size portion to serve during meals. The FNSD observed the serving utensil used for the grits and scrambled eggs in the Pine Bluff dining area and stated it was a 3 ounce utensil and it was too small.</p> <p>An interview with EVS #1 on 05/23/13 at 8:40 AM revealed he was aware of the serving guide available in the kitchen. EVS #1 stated he gathered the serving utensils from the kitchen when he served breakfast, but he did not realize he was using the wrong size serving utensil when he served grits and the scrambled eggs for</p>	F 363	<p>Random weekly audits will be conducted by the Food &amp; Nutrition Services Director, or designee, &amp; Environmental Services Director, or designee. Results of the monitoring will be shared with the Administrator and/or Director of Nursing on a weekly basis &amp; with QAPI Committee monthly for a period of 90 days at which time frequency of monitoring will be determined by the QAPI Committee.</p>	6/19/13	

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F 363	Continued From page 2 breakfast on 05/22/13 and 05/23/13.  An interview on 05/23/12 at 08:43 AM with EVS #2 confirmed she served grits that morning during breakfast from a 3 ounce serving utensil instead of a 4 ounce serving utensil. She stated she had been trained on providing correct portions of foods, but was not aware of the serving guide available in the Maple Knoll kitchen.  A follow-up interview with the FNSD on 05/23/13 at 08:50 AM revealed she provided EVS staff food service instructions and a serving guide was available for each neighborhood kitchen with instruction on portions sizes that staff should use. The FNSD stated that she rounded about every 6 months to ensure that correct portions sizes were being served, but had not completed a round yet this year (2013).	F 363			
F 371 SS=D	483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY  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  This REQUIREMENT is not met as evidenced by: Based on observations, interviews with staff and review of facility policy, the facility failed to remove foods stored beyond the date of	F 371	F 371  The following expired items were discarded immediately: milk, chopped ham, sugar free jello, and sauerkraut.  The Food & Nutrition Services Director purchased a color coded labeling system to ensure food items are not kept beyond expiration date. Production staff educated on the new system.  Random weekly audits will be conducted by the Food & Nutrition Services Director, or designee, & Environmental Services Director, or designee. Results of the monitoring will be shared with the Administrator and/or Director of Nursing on a weekly basis & with QAPI Committee monthly for a period of 90 days at which time frequency of monitoring will be determined by the QAPI Committee.	6/19/13	

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F 371	<p>Continued From page 3</p> <p>expiration (milk, chopped ham, sugar free jello and sauerkraut) from 3 of 8 refrigerators.</p> <p>The findings included:</p> <p>The facility policy, Food and Supply Storage Procedures: Refrigerated Storage, recorded in part "Date and rotate items; first in, first out (FIFO). Discard food past the use-by-date."</p> <p>Observations of refrigeration units revealed the following concerns with expired items: Observations of the central kitchen refrigeration unit and two neighborhood kitchens refrigerators revealed the following concerns with food storage: On 05/20/13 at 09:44 AM the walk-in refrigerator, in the central kitchen, was observed with a two inch long stainless steel pan of diced ham stored on a food cart covered with plastic wrap with a hand written label that recorded an expiration date of 05/13/13. An interview on 05/20/13 at 09:45 AM with the Food &amp; Nutrition Services Director (FNSD) revealed the chopped ham had been missed, but it was the responsibility of all kitchen staff to check refrigeration units for expired items. On 05/20/13 at 09:50 AM a one gallon container of sauerkraut, approximately 3/4 full, was observed stored in the central kitchen's walk-in refrigerator with a hand written label that recorded an open date of 03/22/13 and an expiration date of 03/29/13. The FNSD stated on 05/20/13 at 09:51 AM that staff were trained to allow 7 days after opening before discarding perishable foods without a manufacturer date of expiration. Dietary staff #1 stated on 05/20/13 at 09:52 AM he checked daily for expired foods, but he missed</p>	F 371			

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F 371	<p>Continued From page 4</p> <p>the sauerkraut.</p> <p>On 05/20/13 at 09:55 AM, the milk cooler of the central kitchen was observed with twelve 3.5 ounce containers of strawberry sugar free jello with a manufacturer use-by-date of 05/15/13. The FNSD stated on 05/20/13 at 09:56 AM that she did not get the opportunity to check the refrigeration units for expired items last week and this was missed.</p> <p>On 05/22/13 at 08:37 AM and 12:29 PM and 05/23/13 at 08:20 AM the refrigerator in the Pine Bluff dining area was observed with an eight ounce carton of whole milk with a manufacturer expiration date stamp of 5/21/13. Additionally, on 05/23/13 at 08:10 AM the refrigerator in the Maple Knoll dining area was observed with an eight ounce carton of non-fat milk with a manufacturer expiration date stamp of 05/17/13. An interview on 05/23/13 at 08:38 AM with dietary staff #2 revealed she stocked each neighborhood kitchen with milk and checked daily for expired items. Dietary staff #2 further stated that she had just restocked the refrigerator in Pine Bluff and did not see a carton of milk that expired on 05/21/13 and was not aware that expired milk was stored in the Maple Knoll refrigerator. She stated that she must have missed this. Further observation of both refrigerators revealed the expired cartons of milk were still stored ready for use.</p> <p>During a follow-up interview with the FNSD on 05/23/13 at 08:50 AM she confirmed that the refrigerators in the Pine Bluff and Maple Knoll dining areas contained eight ounce cartons of milk stored past the date of expiration. The FNSD stated that she expected staff to restock the refrigerators and check for expired items. She</p>	F 371			

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F 371	Continued From page 5 stated it was the responsibility of all staff in the central kitchen to check daily for expired items.	F 371		