

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

PRINTED: 08/25/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345222	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 08/07/2014
NAME OF PROVIDER OR SUPPLIER AUTUMN CARE OF DREXEL			STREET ADDRESS, CITY, STATE, ZIP CODE 307 OAKLAND AVENUE DREXEL, NC 28619	
(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 371 SS=E	<p>483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY</p> <p>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</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, record review and staff interviews, the facility failed to keep cold and hot prepared cookout foods at safe serving temperatures. Findings included:</p> <p>On 08/06/14 at 12:22 PM in an outdoor gazebo of the facility, residents were observed seated at folding tables eating grilled hot dogs, hamburgers, other food items and being assisted by staff. Another observation on 08/06/14 at 12:35 PM revealed a 2 quart metal pan containing cole slaw was not on ice and covered with a napkin. The assistant activity director stated no dietary staff were involved in the cookout and it was directed by the activity director (AD) who was observed assisting residents.</p> <p>On 08/06/14 at 12:45 PM the dietary manager (DM) was interviewed and observed in the outdoor gazebo obtaining temperatures on the following food items: a. approximately less than a quart of cole slaw in a 2 quart metal pan, not resting in ice, was observed at a temperature of 69.4 degrees (°)</p>	F 371	<p>This plan of correction constitutes my written allegation of compliance for the deficiency cited. However, submission of this 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>It is the policy of this facility to store, prepare, distribute, and serve food under sanitary conditions by following proper sanitation and food handling practices to prevent the outbreak of foodborne illness. It is facility policy to keep cold and hot prepared cookout foods at safe serving temperatures. Some of the ways that this has been achieved is by re-educating Dietary and Activity Staff that Dietary is responsible for food service at meals including facility-sponsored special events such as cookouts and picnics. A Dietary employee will be assigned and</p>	8/22/14

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

TITLE

(X6) DATE

Electronically Signed

08/21/2014

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>Fahrenheit (F). The DM stated it should have been maintained at 40° F or less and stored on ice</p> <p>b. an approximate 1 inch stack of sliced yellow American cheese, in a zipper closing plastic bag resting on the table and not on ice, was observed at a temperature of 71° F. The DM stated it should have been maintained at 40 °F or less and stored on ice</p> <p>c. a 2 quart metal pan approximately half full of ground cooked hamburger for residents on mechanical diets, resting on the table and not on a heat source, was observed at a temperature of 112° F. The DM stated it should have been maintained at 135 °F or higher.</p> <p>On 08/06/14 at 12:50 PM an interview with the DM revealed that dietary staff prepared and stored food items for cookouts and temperatures were obtained before these items left the kitchen. She stated there was no dietary oversight of the actual grilling and storing of foods in the gazebo. She stated there was no further dietary staff assistance with a cookout unless the meal was a facility-wide activity. She stated cold food items like the cole slaw and American cheese slices should have been kept on ice and the ground hamburger could have been placed on the grill to maintain safe temperatures. The DM stated that although it was a cookout, food safety standards needed to be maintained.</p> <p>On 08/06/14 at 1:00 PM the DM provided a copy of a food temperature log with the handwritten comment "cook out 12:00 noon to gazebo" and illegible initials. This entry noted cole slaw at 38° F, cheese at 38° F and ground meat at 180° F.</p> <p>On 08/06/14 at 3:02 PM an interview with AD</p>	F 371	<p>responsible for food service at all facility-sponsored special events such as cookouts and picnics. Food temperatures will be monitored at outdoor/special events by Dietary staff.</p> <p>No residents were named in this deficiency. No residents experienced negative outcomes.</p> <p>Because all residents are potentially affected by the cited deficiency, on 8/21/14 the Dietary Manger in-serviced Dietary staff and provided training regarding state and federal requirements for storing, preparing, distributing and serving food under sanitary conditions. The training emphasized following food sanitation guidelines and food handling practices to prevent the outbreak of foodborne illness including checking food temperatures and maintaining foods at required temperatures. Dietary staff was in serviced on proper storage of hot and cold foods at outdoor/special events, and procedure for checking food temperatures at outdoor/special events.</p> <p>Effective 8/21/14, a Quality Assurance and Performance Improvement program was implemented to ensure continued compliance. The Dietary Manager/designee conducts a food service audit weekly for two months, monthly for three monthly and as needed to ensure compliance and includes</p>		

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F 371	<p>Continued From page 2</p> <p>revealed the cookouts were organized with dietary staff, the administrator was notified and the facility had been having them for a few years. She stated she would compile a list of interested residents and dietary staff would review it for ordered diets. She stated food preparation and ordering was dietary's responsibility and a man from maintenance did the grilling. She stated dietary staff obtained food temperatures and activity staff had not been taught how to take temperatures. She stated she was not aware of any resident getting sick and they loved the activity.</p> <p>On 08/06/14 at 6:35 PM an interview with the administrator revealed she already had conversations with the DM and AD and even though the cookouts were an activity and occurring outside, she expected the same level of food service which included hygiene and safe food temperature be maintained.</p>	F 371	<p>randomly checking food service. The audit includes monitoring that food is prepared, stored and served under sanitary conditions including monitoring food temperatures. A food service audit will be conducted at every facility-sponsored special event for the next year to ensure food is served under sanitary conditions. The audit includes monitoring that food is prepared, stored and served under sanitary conditions including monitoring food temperatures. Any deficiencies will be corrected immediately, and the findings of the quality assurance checks will be documented and submitted at the monthly Quality Assurance and Performance Improvement Committee meeting for further review and/or corrective action. The Dietary Manager/Designee is responsible for monitoring compliance.</p>		