

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345265	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 09/28/2017
NAME OF PROVIDER OR SUPPLIER BRIAN CENTER HEALTH & REHAB/YA			STREET ADDRESS, CITY, STATE, ZIP CODE 1086 MAIN STREET NORTH YANCEYVILLE, NC 27379		
(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>483.60(i)(1)-(3) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY</p> <p>(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities.</p> <p>(i) This may include food items obtained directly from local producers, subject to applicable State and local laws or regulations.</p> <p>(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.</p> <p>(iii) This provision does not preclude residents from consuming foods not procured by the facility.</p> <p>(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety.</p> <p>(i)(3) Have a policy regarding use and storage of foods brought to residents by family and other visitors to ensure safe and sanitary storage, handling, and consumption. This REQUIREMENT is not met as evidenced by: Based on observation and facility staff interviews, the facility failed to label food and remove expired food from 1 of the 2 nourishment refrigerator, maintain proper dishwasher temperatures and use dish sanitizer at manufacturer recommended concentration levels.</p> <p>Findings included: 1. An observation of the nourishment refrigerator on 200 hallway on 9/28/17 at 9:36 AM revealed a white colored cardboard box that contained</p>	F 371	<p>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of facts alleged or the conclusions set forth in the statement of deficiencies. The plan of correction prepared and/or executed solely because it is required by the provisions of federal and state law. This plan of correction is the facility's allegation of compliance.</p>	10/17/17	

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

TITLE

(X6) DATE

Electronically Signed

10/17/2017

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>twelve - four ounce (oz.) cups that were labelled "Sysco - thickened Lemon Flavored Water" with expiration date 8/2/17 placed on the bottom shelf of the refrigerator. The nourishment refrigerator contained an eight oz. can of Ensure that was not labelled with a resident name or date and also contained a blue personal lunch bag that was not labelled or dated.</p> <p>During an interview with the Nurse Aide (NA) on 9/28/17 at 9:36 AM he stated that staff food was not supposed to be placed in the nourishment refrigerator. He also stated that the dietary staff cleaned and maintained the refrigerator. He further indicated that dietary staff removed expired food and restocked the refrigerator.</p> <p>During an interview with Dietary Manager on 9/28/17 at 9:50 AM, she indicated that the dietary staff cleaned the refrigerators and restocked the snacks and fluids in the refrigerator. She further stated that staff could place their personal food in the refrigerator provided the food was labelled with a name and date.</p> <p>During an interview with Dietitian (RD) on 9/28/17 ay 10: 45 AM, RD indicated that the staff was aware not to place personal food in nourishment refrigerator. She further stated that Ensure was not the supplement provided by the facility and usually brought in by family. She further stated that the can of Ensure should be labelled with the resident name and a date when it was placed in the refrigerator.</p> <p>During an interview with the Dietary District Manager on 9/28/17 at 12:05 PM, he stated that he was not aware that staff was storing cardboard boxes in the nourishment refrigerator. It was his</p>	F 371	<p>F371</p> <p>1. The cardboard box containing expired thickened lemon flavored water was removed immediately. The other nourishment refrigerator was inspected to ensure that all items were not outside of the expiration date. The bedside coolers of the residents prescribed thickened liquids were inspected to ensure that the items were not outside of the expiration date. Refrigerated items in the dietary department were inspected to ensure that the items were not outside of the expiration date. 9/28/2017</p> <p>Disciplinary action was rendered to the dietary personnel responsible for stocking the nourishment refrigerator. Education was provided by the District Dietary Manager to dietary staff regarding inspection of food items for expiration dates and the removal of cardboard covering before stocking the refrigerator. Education by the Staff development Coordinator regarding the inspection of Food items for expiration dates and the removal of cardboard coverings will be provided during the orientation process of newly hired employees. The Director of Nursing provided education to the facility staff regarding the prohibition of placing personal items in the nourishment refrigerator and the required dating and labeling of residents refrigerated items. 9/28/2017 The SDC will incorporate education on the prohibiting employees placing personal items in the nourishment refrigerator and the dating</p>		

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F 371	<p>Continued From page 2</p> <p>expectation that the staff do not store it that way instead place them individually so that the expiration dates could be seen easily.</p> <p>2. An observation of the dishwasher temperatures on 9/28/17 at 9: 45 AM, revealed wash temperature at 170 degrees Fahrenheit (F) and rinse temperature at 175 degrees F.</p> <p>Review of the Ecolab dishwasher specifications revealed operation temperatures for wash (high-temp minimum) 160 degrees F and sanitizing rinse (high-temp minimum) 180 degrees F.</p> <p>During an interview with the Dietary Manager on 9/28/17 at 9: 50 AM, she indicated that she was unsure why the rinse temperature was lower than the recommendations. She indicated that the wash cycle per manufacturer recommendation was 160 degrees and rinse recommendation was 180 degrees.</p> <p>During an interview with the Dietary District Manager on 9/28/17 at 12:05 PM, he indicated that he was unsure why the rinse temperature had dropped. He stated that the maintenance personnel had worked on the machine and the dish washer was now maintaining recommended temperatures. He also stated that dish washer was serviced on a regular basis. He further indicated that all the dishes were rewashed.</p> <p>3. An observation of the red bucket that was used to sanitize surfaces in the kitchen on 9/28/2017 at 9:50 AM, revealed the red bucket contained sanitizer [Oasis 146 Multi-Quat Sanitizer] used for sanitizing kitchen surfaces. Test strip indicated 50 ppm concentration.</p>	F 371	<p>and labeling of residents refrigerated items in the orientation process of newly hired facility employees. 9/28/2017</p> <p>Signage was placed on the nourishment refrigerators to direct employees to validate that items are not outside of the expiration date and the prohibiting of employee personal items in the nourishment refrigerator. 9/28/2017 The Dietary manager will inspect the facility nourishment room refrigerators daily to ensure compliance with the expiration dates, the absence of cardboard coverings and the absence of employee's personal items being stored with residents items. An audit tool was created to reflect the findings. Monitoring will be conducted by the Dietary Manager.</p> <p>Data obtained from the audit tool will be presented at the monthly QAPI meeting for the next three months to ensure compliance with the corrective action.</p> <p>2. Upon observation of the dishwasher rinse temperatures that were below the Ecolab specifications the dishwasher booster heater was adjusted immediately by the Maintenance Supervisor to sustain a rinse temperature of 180 degrees. 9/28/2017 Hobart Repair Company was engaged to inspect the booster heater and the Dishwasher. The inspection revealed one defective heating element that was replaced immediately. A boiler company was engaged to thoroughly clean the burners to maximize the heating</p>		

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F 371	Continued From page 3 During an interview with the Dietary Manager on 9/28/2017 at 9:50 AM, she stated that staff should use the test strip, to test and make sure that the sanitizer in the bucket containing Quats sanitizer met manufacturer recommendations of 200 - 400 ppm.	F 371	<p>temperature of the dietary boiler. 10/4/2017</p> <p>The dietary manager or her designee will monitor dishwasher rinse temperatures three times per day to monitor for compliance with temperature specifications. In the event there is a deviation from the specified temperature the maintenance department will be notified immediately. An audit tool was created to reflect these findings. The dietary Manager will monitor the results and report any negative findings to the Maintenance Director and Administrator. Inspections of the dishwasher by Ecolab will be conducted Monthly. Any concerns arising from the inspection will be brought to the attention of the Maintenance Department immediately for correction. 10/4/2017</p> <p>Data obtained from the audit tool will be presented at the monthly QAPI meeting for the next three months to ensure compliance with the corrective action.</p> <p>3. Upon observation of the container used to sanitize kitchen surfaces that measured below the manufacturers 200-400 ppm of Oasis 146 Multi Quat Sanitizer the container contents was immediately discarded. The contents were replaced with a sanitizer solution that was tested by the test strips that indicated correct ppm as recommended by the manufacturer. Additional containers were tested to validate the correct ppm was achieved. An audit tool was created to monitor test strip use to validate the compliance with the manufactures recommended ppm.</p>		

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

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F 371	Continued From page 4	F 371	<p>The Dietary Manager will monitor the results. Data obtained from the audit tool will be presented at the monthly QAPI. 10/4/2017</p> <p>The District Manager provided education to the dietary staff regarding the correct use of sanitizing solutions and the use of test strips to validate compliance with the manufacturers recommendations for ppm. The orientation process for newly hired staff will include the correct use of sanitizing solutions and the use of test strips to validate compliance with the manufacturers recommendations for ppm.</p>	