

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345496	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/13/2017
NAME OF PROVIDER OR SUPPLIER LIBERTY COMMONS N&R ALAMANCE			STREET ADDRESS, CITY, STATE, ZIP CODE 791 BOONE STATION DRIVE BURLINGTON, NC 27215	
(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, interviews and record review, the facility failed to clean kitchen equipment.</p> <p>The findings included:</p> <p>1a. An observation of the stove on 10/17/17 at 9:55 AM, revealed a large volume of encrusted burned grease and dried foods and liquids inside the burners and all around the top and bottom of stove.</p>	F 371	<p>The statements made on this plan of correction are not an admission to and do not constitute an agreement with the alleged deficiencies.</p> <p>To remain in compliance with all federal and state regulations the facility has taken or will take the actions set forth in this plan of correction. The plan of correction constitutes the facility's allegation of compliance such that all alleged deficiencies cited have been or will be</p>	11/10/17

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

TITLE

(X6) DATE

Electronically Signed

11/01/2017

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	Continued From page 1 b. Observation of the oven on 10/10/17 at 9:55 AM, revealed the inside and outside of two ovens had large volumes of burned grease, brown matter, dried foods and liquids encrusted on the surfaces. c. Observation of the deep fryer on 10/10/17 at 9:55 AM, revealed a heavy built up grease and burned food inside and dried greasy liquids on the outside encrusted in the surfaces. The fryer pans had burned grease build up throughout the basket. d. Observation of the five compartment steam table on 10/10/17 at 9:55 AM, revealed the surface had a large volume of dried brown matter encrusted in the pans, lids and surface of the steam table. There was food particles and foil floating inside standing water. The inside also had large brown matter and rust encrusted in the pan. e. Observation of the plate warmer on 10/10/17 at 9:55 AM, revealed the outside of the warmer had a large amount of brown dried liquids and food encrusted into the surface. The plate warmer had clean plates stacked, the inside had a large amount of dried foods, dried liquids and crumbs throughout. f. Observation of five food carts on 10/10/17 at 9:55 AM, revealed large amounts of dried liquids, food crumbs and brown matter inside and outside of the carts. During an interview on 10/10/17 at 10:10 AM, the Kitchen Supervisor indicated staff were expected	F 371	corrected by the dates indicated. 1.Plan for correcting specific deficiency. The process that led to deficiency cited. a.The stove was cleaned immediately on 10/10/17. b.The oven was cleaned immediately on 10/10/17. c.The deep fryer was cleaned immediately on 10/10/17. d.The steam table was cleaned immediately on 10/10/17. 3 new pans were purchased on 10/10/17 and 2 new pans have been ordered to replace the old stained pans. e.The plate warmer was cleaned immediately on 10/10/17. f.The five food carts were cleaned on 10/10/17. A daily cleaning schedule was initiated on 10/31/17 to ensure the kitchen equipment is cleaned routinely. Staff are to check off schedule once items are cleaned according to policy. The Dietary Manager and/or her Assistant will audit completion of the cleaning schedule. 2.Procedure for implementing the acceptable plan of correction. All Dietary staff were reeducated by the Consultant Dietitian on 10/30/17. Information presented included Food Service Sanitation Practices including completion		

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F 371	<p>Continued From page 2</p> <p>to follow the daily general cleaning and weekly kitchen equipment checklist. She further stated she was unaware of when the last time the equipment had been deep cleaned. The supervisor presented a daily cleaning list that did not include the stove, oven, steam table, deep fryer, plate warmer or carts. The supervisor confirmed the kitchen equipment had not been cleaned.</p> <p>During an observation on 10/10/17 at 12:00 PM, the five meal carts were observed from 12:00 PM to 1:30 PM and the dried food and liquids from breakfast had not been removed. There were food particles and dried liquids on the inside and outside that appeared to be encrusted in the carts itself.</p> <p>Review of the daily cleaning schedule identified the floors were to be swept and mopped after each meal. Clean and sanitize all work areas, including hand sinks daily. Big carts were to be done outside if the weather permits. Monday 1st shift/Wed 2nd shift keep carts wiped down all other days of the week.</p> <p>During a follow-up interview on 10/12/17 at 12:00 PM, the Kitchen Manager reported that supervisor was responsible for ensuring that the kitchen equipment was cleaned monthly which included the ovens, stove, steam table, plate warmer etc. The Kitchen manager further stated she was responsible for rechecking behind the supervisor and the kitchen staff to ensure the kitchen equipment had been thoroughly cleaned. She further stated there was also a weekly checklist that should also be followed, but was</p>	F 371	<p>of Cleaning</p> <p>Schedule Assignments & Monitoring of completed work. Any in-house staff member who did not receive in-service training will not be allowed to work until training has been completed. Information presented included Food Service Sanitation Practices including completion of Cleaning Schedule Assignments & Monitoring of completed work.</p> <p>Cleaning schedules were revised to include all areas identified during survey process on 10/31/17. Cleaning schedules were posted and staff was assigned to clean identified areas. Completed cleaning schedules will be kept on file in the Dietary Department for a period no less than one (1) year and will be stored at the facility for a period of five (5)years.</p> <p>3.Monitoring Procedure to ensure that the plan of correction is effective and that specific deficiency cited remains corrected and/or in compliance with regulatory requirements.</p> <p>The Dietary Manager will monitor cleaning of the Kitchen and Equipment using the "Dietary QA Audit"</p>		

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F 371	<p>Continued From page 3</p> <p>unable to present the information at this time. The Kitchen manager was only able to present a daily kitchen checklist with a few items typed in the kitchen. The kitchen supervisor reported that once the daily checklist was completed she would throw away the form. The kitchen manager confirmed that the kitchen equipment had not been cleaned.</p> <p>During an interview on 10/12/17 at 12:10 PM, the Administrator indicated that kitchen manager was responsible for ensuring the kitchen equipment was cleaned thoroughly on a daily basis. The kitchen manager was expected to make sure the kitchen standards were met in accordance to the regulation.</p>	F 371	<p>tool which evaluates cleaning & sanitizing practices in all Food Storage Areas.</p> <p>This audit will be completed 5 days/week for 4 weeks and then weekly times 2 months or until resolved by the QA committee.</p> <p>Reports will be presented to the weekly QA committee to ensure corrective action initiated as appropriate.</p> <p>Compliance will be monitored and ongoing auditing program reviewed at the Weekly QA Meeting. The Weekly QA Meeting will be attended by the Administrator, Director of Nursing, Dietary Manager, and Maintenance Director.</p> <p>4. The title of the person responsible for implementing the plan of correction.</p> <p>The Administrator is responsible for implementation and completion of the acceptable plan of correction.</p>		