

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

PRINTED: 05/21/2015
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345171	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 04/30/2015
NAME OF PROVIDER OR SUPPLIER WHITE OAK MANOR - SHELBY			STREET ADDRESS, CITY, STATE, ZIP CODE 401 N MORGAN STREET SHELBY, NC 28150		
(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 000	INITIAL COMMENTS	F 000			
F 371 SS=E	<p>483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY</p> <p>The facility must -</p> <p>(1) Procure food from sources approved or considered satisfactory by Federal, State or local authorities; and</p> <p>(2) Store, prepare, distribute and serve food under sanitary conditions</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations and staff interviews the facility failed to ensure one of the kitchen's "sanitizing buckets" contained sanitizing agent to sanitize kitchen surfaces and equipment and bread products did not have expired use by dates.</p> <p>The findings include:</p> <p>1. Observations on 04/27/15 at 10:05 AM in the facility's kitchen revealed one of the kitchen's "sanitizing buckets" which contained liquid and cloths was positioned on a counter top ready for use. Monitoring of the liquid inside of the bucket revealed it did not contain any sanitizing agent.</p> <p>Interview with the facility's Dietary Manager (DM) on 04/27/15 at 10:05 AM revealed the sanitizing bucket was available for staff use to sanitize</p>	F 371	<p>White Oak Manor-Shelby does (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>1. How Corrective Action will be Accomplished for Each Resident Found to Have Been Affected by the Deficient Practice.</p> <p>1.a) The sanitizer bucket contents were immediately disposed of and then corrected to contain a minimum of 50 parts per million of chlorine sanitizing agent. All other sanitizer buckets and three-compartment sink were checked. Dietary staff working in the kitchen were</p>	5/21/15	

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

TITLE

(X6) DATE

Electronically Signed

05/21/2015

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>kitchen surfaces and equipment. The DM further stated that the bucket should contain a minimum of 50 parts per million of a chlorine sanitizing agent and that staff should ensure that there is adequate sanitizing agent in the bucket prior to making it available for use.</p> <p>2. Observations on 04/27/15 at 10:25 AM, of food stored in the kitchen's dry storage area, revealed a total of eight (8) loaves of bread had expired use by dates. The expired dates on these eight (8) loaves of bread were as follows; two (2) loaves of bread had expired use by dates of 04/14/15, three loaves of bread had expired use by dates of 04/21/15 and three loaves of bread had expired use by dates of 04/25/15. One of the loaves of bread with an expired use by date of 04/14/15 was observed to contain mold growth on the bread.</p> <p>Interview with the facility's Dietary Manager (DM) on 04/27/15 at 10:27 AM revealed dietary staff should check the use by date on bread products when they are delivered to the facility and everyday while in storage to ensure these dates were not expired. The DM further stated there should not be any bread products which have expired use by dates.</p>	F 371	<p>given immediate verbal re-education.</p> <p>1.b) The eight loaves of bread in the kitchen's dry storage area were immediately disposed of and all remaining bread loaves were checked again to ensure current use by dates. None of the bread disposed of was served on the date of observation. Dietary staff working in the kitchen were given immediate verbal re-education.</p> <p>2. How Corrective Action will be Accomplished for Those Residents Having a Potential to be Affected by the Same Deficient Practice.</p> <p>1.a) All active Dietary employees have been inserviced on the proper sanitizing solution method which contains a minimum of 50 parts per million of chlorine sanitizing agent, as well as completion of a daily checklist that is completed on both First and Second Shift (Dietary Sanitizing Solution Daily Checklist). The Cook or Cook Aide on each shift is responsible for this checklist. The inservicing was conducted by the Dietary Manager on April 27, 2015 for all Dietary employees. One Dietary staff member is currently on a medical leave of absence and this inservicing will be completed with her prior to the start of her next shift once released to return to work. This training will be specifically repeated with newly hired Dietary staff during Orientation. This training will also be reinforced as necessary to ensure compliance.</p> <p>1.b) All active Dietary employees have</p>		

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F 371	Continued From page 2	F 371	<p>been inserviced on ensuring bread is visually observed upon delivery and current bread stock is visually checked daily for current use by date(s). Additionally, Dietary staff were also inserviced on daily use of monitoring tool (Dietary Daily Checklist for Bread Date). The Dietary Manager or assigned Aide (in the absence of the Dietary Manager) is responsible for the daily completion of this checklist. This inservicing was conducted by the Dietary Manager on April 27, 2015 for all Dietary employees. One Dietary staff member is currently on a medical leave of absence and this inservicing will be completed with her prior to the start of her next shift once released to return to work. This training will be specifically repeated with newly hired Dietary staff during Orientation. This training will also be reinforced as necessary to ensure compliance.</p> <p>3. Address What Measures Will be Put Into Place or Systemic Changes made to Ensure that the Deficient Practice Will Not Recur.</p> <p>1.a) All active Dietary employees have been inserviced on the proper sanitizing solution method which contains a minimum of 50 parts per million of chlorine sanitizing agent, as well as completion of the Dietary Sanitizing Solution Daily Checklist. One Dietary staff member is currently on a medical leave of absence and this inservicing will be completed with her prior to the start of her</p>		

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F 371	Continued From page 3	F 371	<p>next shift once released to return to work. This training will be specifically repeated with newly hired Dietary staff during Orientation. This training will also be reinforced as necessary to ensure compliance. Ongoing compliance to F371 will be monitored by Administrator and Dietary Manager. The Dietary Manager is responsible for ensuring the checks are being completing, the checklist is being completed, and will then submit these to the Administrator weekly to ensure compliance with the proper use of sanitizing solution to ensure a minimum of 50 parts per million of chlorine sanitizing agent. These daily checks have become part of the daily tasks for Dietary and will continue on an ongoing basis.</p> <p>1.b) All active Dietary employees have been inserviced on ensuring bread is visually observed upon delivery and current bread stock is visually checked daily for current use by date(s). Additionally, Dietary staff were also inserviced on daily use of monitoring tool (Dietary Daily Checklist for Bread Date). This inservicing was conducted by the Dietary Manager on April 27, 2015 for all Dietary employees. One Dietary staff member is currently on a medical leave of absence and this inservicing will be completed with her prior to the start of her next shift once released to return to work. This training will be specifically repeated with newly hired Dietary staff during Orientation. This training will also be reinforced as necessary to ensure compliance. Ongoing compliance to F371 will be monitored by Administrator and</p>		

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F 371	Continued From page 4	F 371	<p>Dietary Manager. The Dietary Manager is responsible for ensuring the checks are completed, the checklist is being completed, and will then submit these to the Administrator weekly to ensure compliance with daily checks of bread to ensure current use by date(s). These daily checks have become part of the daily tasks for Dietary and will continue on an ongoing basis.</p> <p>4. Indicate How the Facility Plans to Monitor Its Performance to Make Sure That Solutions are Sustained and Dates When Corrective Action Will be Complete.</p> <p>Ongoing compliance to F371 will be monitored by review of the observations and checklist completion for both the (1) Dietary Sanitizing Solution Daily Checklist and (2) Dietary Daily Checklist for Bread Date. The results of these daily checks will be reviewed by the QI team upon completion monthly for three months, then quarterly for three quarters, and then as needed thereafter for any additional recommendations. The results of these daily checks will also be reviewed during the quarterly QA Meeting for further discussion and recommendations.</p> <p>The Administrator and Dietary Manager are responsible for ongoing compliance to F371.</p> <p>Compliance date for F371: May 21, 2015</p>		