

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

PRINTED: 08/22/2013  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  185141	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  C 08/08/2013
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NAME OF PROVIDER OR SUPPLIER  SIGNATURE HEALTHCARE OF GEORGETOWN	STREET ADDRESS, CITY, STATE, ZIP CODE 102 POCAHONTAS TRAIL GEORGETOWN KY 40324
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(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
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F 000 INITIAL COMMENTS

A Recertification/Abbreviated Survey to include investigating KY#00020527 was initiated on 08/08/13 and concluded on 08/08/13. KY#-00020527 was unsubstantiated. Deficiencies were cited at the highest scope/severity of an "E".

F 371 483.35(l) FOOD PROCURE, SS-E 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 observation, interview and policy review, it was determined the facility failed to store food under sanitary conditions. Observations during initial tour revealed food stored under the soiled side of the pot and pan sink, dry storage was not protected from overhead pipe and unit resident nourishment refrigerators contained outdated food products and a non-food item on the shelf with other food products.

The findings include:  
1. Review of the facility's policy titled, "Food Storage", no effective date, revealed food was

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F 371 F371

1. The food storage was immediately assessed on August 8<sup>th</sup>, 2013 by the administrator, the director of nursing the dietary manager and the plant operations director. All stored food was determined to be stored under sanitary conditions. The watermelon was removed immediately during survey. Dry storage was assessed and the dry paper products were discarded from under the overhead pipe by the dietary manager. The pipe was assessed and condensation was corrected by the plant operations director. The nourishment refrigerators were assessed for outdated food products and removed on August 8<sup>th</sup>, 2013 by the director of nursing. The non-food item glycerin swab, was removed by the director nursing on August 8<sup>th</sup>, 2013.



LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  
*Anna Vess RN* TITLE *Don* (X6) DATE *8/31/13*

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 371	Continued From page 1 purchased in quantities which could be stored properly, food was arranged in storage areas in food groups to make it easier to store, locate, and inventory.  Observation during the initial kitchen tour, on 08/06/13 at 8:55 AM, a case of water melon was stored under the soiled side of pot and pan sink next to the Eco Labs Chemical Oasis Multid Quat Sanitizer.  Interview, with Dietary Manager/Registered Dietitian (RD), on 08/06/13 at 2:30 PM, revealed the case of watermelon should not have been stored under the dirty side of the pot and pan sink on a milk grate next the chemical sanitizer because of possible contamination.  2. Review of the facility's policy titled, "Food storage", no effective date, revealed food was stored a minimum of 6 inches above the floor on clean racks, dollies or other clean surfaces, and was protected from splash, overhead pipes, or other contamination. All stock must be rotated with each new order received. Rotating stock is essential to ensure the freshness and highest quality of all foods. Supervision is necessary to make sure that the person designated to put stock away is rotating it properly.  Observation during the initial tour, on 08/06/13 at 8:55 AM, revealed the dry storage ceiling with a 12 inch long brown dried stain above a box of plastic wrap located on the top shelf. The plastic wrap was saturated with a dried brown stain.  Interview, with Dietary Manager RD, on 08/08/13 at 2:30 PM, revealed she did not know why there is a leak above the dry storage and the plastic	F 371	2. The administrator, director of nursing, dietary manager and the plant operations director assessed the facility on August 8 <sup>th</sup> , 2013 to ensure there were no other areas of food storage that failed to meet the storage and preparation, distribution, and serving of food under sanitary conditions. The Administrator did not observe other evidence that the requirement was not met. All food was stored prepared and distributed and served under sanitary conditions.		

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F 371	<p>Continued From page 2</p> <p>wrap box should not be under the leak because of possible contamination.</p> <p>Interview, with Dietary Manager RD, on 08/07/13 at 8:45 AM, revealed the cook is assigned to rotate stock every Monday and it is the Dietary Manager responsibility to check stock, look for dented cans, and check to see if the stock has been rotated.</p> <p>3. Review of the facility's policy titled, "Meal Snack/Bedtime Nourishments", no effective date, revealed Dietary should check the pantry refrigerators every morning to see that snacks are being passed. Those items that have not been passed should be returned to the kitchen for the Dietary Manager to follow up on. Outdated cartons of milk should be removed on a daily basis by Dietary. Pitchers of juice over 48 hours old should be returned to dietary, sanitized and refilled for the stations.</p> <p>Record review of the facility's titled "Medication Storage", effective 10/07, revealed refrigerated medications were kept in closed and labeled containers, with internal and external medications separated and separate from fruit juices, applesauce, and other foods used in administering medications. Other foods such as employee lunches, activity department refreshments are not stored in this refrigerator.</p> <p>Observation of the Rehabilitation Unit resident nourishment refrigerator, on 08/08/13 at 8:50 AM, revealed it contained a box of lemon oral swabs, three undated prune juices, outdated thickened orange juices and vanilla pudding dated 08/08/13, outdated chocolate pudding dated 08/04/13 with the appearance of water in the bowl and on top of</p>	F 371	<p>3. The Administrator, director of nursing, dietary manager and the plant operations director will ensure a process change by the following: The dietary manager and or plant operations director will check the dry food storage three times per week to ensure products are protected from the overhead pipes and no food is stowed on the floor under the pots and pan compartment sink. The director of nursing and or charge nurse will review the nourishment refrigerators for two nursing units three times per week to ensure there are no outdated food products and that the lemon glycine are not stowed in the nourishment refrigerator. The dietary staff and the licensed nursing staff will be educated by September 6<sup>th</sup> 2013, by the director of nursing regarding the proper food storage and no food storage, preparation, distribution to include the dating and rotation of food, and the serving of food and food products and observation of proper dry food storage.</p>		

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F 371	<p>Continued From page 3</p> <p>the lid, and outdated prune juice with expiration date of 07/12/13.</p> <p>Interview with the Dietary Manager/RD, on 08/08/13 at 11:00 AM, revealed dietary and nursing work as a team concerning nourishment stocking, ordering and rotation.</p> <p>Interview with Dietary Aide #7, on 08/08/13 at 11:02 AM, revealed snacks were delivered to units at 10:00 AM, 2:00 PM, and 7:30 PM. She stated Dietary rarely goes into the nourishment rooms. Nurses are responsible for checking, rotating nourishments and to check milk dates.</p> <p>Interview, Registered Nurse #1, on 08/08/13 at 11:20 AM, revealed nursing checked the dates, made nourishment requests and used the communication sheets to order nourishments for the Rehabilitation Unit from dietary.</p> <p>Interview with Licensed Practical Nurse (LPN) #3, on 08/08/13 at 5:40 PM, revealed one resident liked cold oral swaps. The oral swaps were kept in the resident refrigerator because they were not resident specific. She revealed she did not know why the oral swaps were not stored in the medication room refrigerator next door. She further revealed that medication and food should not be stored together.</p> <p>4. Review of the facility's policy titled, "Meal Snack/Bedtime Nourishments", no effective date, revealed Dietary should check the pantry refrigerators every morning to see that snacks were being passed. Those items that have not been passed should be returned to the kitchen for the Dietary Manager to follow up on. Outdated cartons of milk should be removed on a daily</p>	F 371	<p>4. The process of three times per week observation of the storage, preparation and distribution and serving of food will be reported to the administrator weekly in the daily administrative meeting to ensure compliance and address any non-compliant opportunities identified. The three times weekly observation reports for storage of food under sanitary conditions will be forwarded by the administrator, to the quarterly, quality assurance meeting, for six months to be reviewed and evaluated by the administrator and the medical director and or until such time the deficient practice has shown substantial compliance but no less than two quarters of observation and reporting.</p> <p>DATE: September 7, 2013</p>		

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F 371	Continued From page 4 basis by Dietary. Pitchers of juice over 48 hours old should be returned to Dietary, sanitized and refilled for the stations.  Review of the facility's policy titled, "Nourishments", no effective date, revealed if individual requests are made for specific nourishments, the food item is labeled and dated with the resident's name before delivery to the station.  Observation of the Skilled Nursing Unit resident nourishment refrigerator, on 08/08/13 at 11:07 AM, revealed the nourishment refrigerator with outdated orange juice, 08/06/13, not dated prune juice, chicken wings with the date of 08/06/13 which was not identified for a specific resident.  Interview with the Dietary Manager/RD, on 08/08/13 at 11:00 AM, revealed dietary and nursing work as a team concerning nourishment stocking, ordering and rotation.  Interview with Dietary Aide #7, on 08/08/13 at 11:02 AM, revealed snacks delivered to units at 10:00 AM, 2:00 PM, and 7:30 PM. Send additional snacks for residents' not assigned snacks. Dietary rarely goes into the nourishment rooms. Nurses are responsible for checking, rotating nourishments and to check milk dates.  Interview with LPN #2, on 08/08/13 at 11:05 AM, revealed they checked for outdated milk and food items and notify dietary. She further revealed the dated chicken wings, 08/06/13, belonged to a resident.  Interview with the Unit Manager, on 08/08/13 at 11:15 AM, revealed it was a team effort and team	F 371			

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F 371	Continued From page 5	F 371	F431	
F 431 SS=D	responsibility to check and rotate the stock. 483.60(b), (d), (e) DRUG RECORDS, LABEL/STORE DRUGS & BIOLOGICALS  The facility must employ or obtain the services of a licensed pharmacist who establishes a system of records of receipt and disposition of all controlled drugs in sufficient detail to enable an accurate reconciliation; and determines that drug records are in order and that an account of all controlled drugs is maintained and periodically reconciled.  Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable.  In accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments under proper temperature controls, and permit only authorized personnel to have access to the keys.  The facility must provide separately locked, permanently affixed compartments for storage of controlled drugs listed in Schedule II of the Comprehensive Drug Abuse Prevention and Control Act of 1976 and other drugs subject to abuse, except when the facility uses single unit package drug distribution systems in which the quantity stored is minimal and a missing dose can be readily detected.	F 431	1. The director of nursing removed the Limon glycerol swabs from the rehabilitation Unit resident nourishment refrigerator on August 8 <sup>th</sup> 2013 during the annual survey.  2. The director of nursing evaluated the two nursing units, the main unit and the rehabilitation unit refrigerators on August 8 <sup>th</sup> , 2013 for other opportunities of failure to ensure proper storage of drugs and biological. No other deficient practice was identified.  3. The clinical licensed nursing staff will be educated by September 6 <sup>th</sup> , 2013 by the director of nursing regarding the storage and labeling of drugs and biological to include that a medication and food should not be stored together. The clinical nursing staff will evaluate the "food or nourishment refrigerators" three times per week to ensure proper storage of drugs and biological.	

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F 431	<p>Continued From page 6</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview and review of facility's policy, it was determined the facility failed to ensure proper storage of drugs and biologicals. Observation of the Rehabilitation Unit nourishment room refrigerator revealed a box of glycerol lemon oral swabs was stored with food products.</p> <p>The findings include:</p> <p>Record review of facility's policy titled "Medication Storage", effective 10/07, revealed refrigerated medications were kept in closed and labeled containers, with internal and external medications separated and separate from fruit juices, applesauce, and other foods used in administering medications. Other foods such as employee lunches, activity department refreshments are not stored in this refrigerator.</p> <p>Observation of the Rehabilitation Unit resident nourishment refrigerator, on 08/08/13 at 8:50 AM, revealed it contained a box of lemon oral swabs.</p> <p>Interview with Licensed Practical Nurse (LPN) #3, on 08/08/13 at 5:40 PM, revealed a resident likes cold oral swabs. The oral swabs were kept in the resident refrigerator because they were not resident specific. She revealed she did not know why the oral swabs were not stored in the medication room refrigerator next door. She further revealed that medication and food should not be stored together.</p>	F 431	<p>4. The three times weekly observation of the food and or nourishment refrigerators by the unit charge nurse will be forwarded to the weekly at risk meeting for review with the director of nursing and or assistant director of nursing to ensure compliance and any identified revisions of the plan. The weekly reports of the observation of the food and the nourishment refrigerators will be forwarded by the director of nursing to the quarterly quality assurance meeting for review and discussion by the Administrator and Medical Director.</p> <p>DATE: September 7, 2013</p>	
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K 000	<p>INITIAL COMMENTS</p> <p>CFR: 42 CFR 483.70(a)</p> <p>BUILDING: 01</p> <p>PLAN APPROVAL: 04/13/76</p> <p>SURVEY UNDER: NFPA 101 2000 Existing</p> <p>FACILITY TYPE: SNF/NF</p> <p>TYPE OF STRUCTURE: One story Type II (200)</p> <p>SMOKE COMPARTMENTS: 7</p> <p>FIRE ALARM: Complete fire alarm system (upgraded in September 2011)</p> <p>SPRINKLER SYSTEM: Complete (wet) sprinkler system added new dry system in September 2011</p> <p>GENERATOR: One Type II Diesel generator. New in September 2011</p> <p>A standard Life Safety Code survey was conducted on 08/06/13. Signature Healthcare of Georgetown was found to be in compliance with Title 42, Code of Federal Regulations, 483.70(a) et seq. (Life Safety from Fire).</p>	K 000			
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE			TITLE		(X6) DATE

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