

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

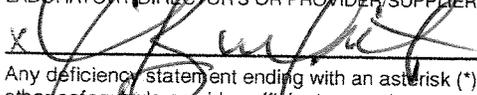
PRINTED: 07/24/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185196	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 07/17/2012
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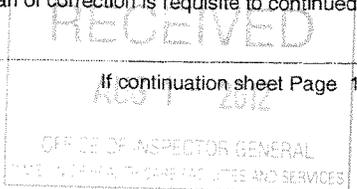
NAME OF PROVIDER OR SUPPLIER KINDRED NURSING AND REHABILITATION-BASHFORD	STREET ADDRESS, CITY, STATE, ZIP CODE 3535 BARDSTOWN ROAD LOUISVILLE, KY 40218
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F 000	INITIAL COMMENTS	F 000	<i>This Plan of Correction is the center's credible allegation of compliance.</i>	
F 364 SS=E	483.35(d)(1)-(2) NUTRITIVE VALUE/APPEAR, PALATABLE/PREFER TEMP Each resident receives and the facility provides food prepared by methods that conserve nutritive value, flavor, and appearance; and food that is palatable, attractive, and at the proper temperature. This REQUIREMENT is not met as evidenced by: Based on observation, interview and review of the facility's policies Food Preparation & Presentation and the Test Tray Worksheet Instruction, it was determined the facility failed to serve food prepared by methods that conserved the proper temperature preferred by residents for two (2) of three (3) sampled residents and four (4) of four (4) unsampled residents. Resident #1, #3 and unsampled residents A,B,C,D. The finding include: Review of the facility's policy regarding Food Preparation & Presentation, dated 10/31/08, revealed food temperatures are kept at the appropriated levels to maintain flavor and palatability. Review of the facility's policy guideline regarding Test Tray Worksheet Instructions, dated	F 364	F 364 SS=E-Nutritive Value/Appear, Palatable/Prefer Temp. 1) How corrective action will be accomplished for those affected : Residents 1, 3, A, B, C and D were all visited by the dietary Manager on 7/25/2012 and had their food preference updated per their request. The Dietary Manger explains that if any food does not met their preferred temperature that to let the nursing staff know and they will let dietary know to have food heated or make them a new tray. 2. How Corrective action will be accomplished for those residents having the potential to be affected: The Dietary Manager will interview all residents by 8/28/2012 for food preference and update per their request. The dietary manager will additionally explains to them to let nursing staff know if food does not met their preferred temperature and they will let dietary know so food can be heated or a new tray provided.	Completed 8/31/2012 Completed 8/31/2012

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Administrator	(X6) DATE 8/1/12
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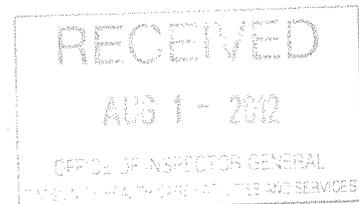
Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 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 364	<p>Continued From page 1</p> <p>04/09/04, revealed the worksheet purpose was to record and evaluate resident meals, and analyze and trend results for temperature. If a problem was identified, the number of test trays were to be increased for a meal or cart to determine the root cause and appropriate corrective action.</p> <p>Observation of the steam table with the Dietary Manager, on 07/16/12 at 5:00 PM, revealed the following food temperatures: Sliced Ham 160 degrees Fahrenheit (F); Pinto Beans 180 degree F; Turnip Greens 160 degrees F; and Cream of Mushroom Soup 170 degrees F. The sliced ham and pinto beans and turnip greens were served on a plate and the cream of mushroom soup was served in a bowl.</p> <p>Observation of the test tray on the 300 unit, on 07/16/12 at 5:35 PM, revealed the following food temperatures: sliced ham 84 degree F; pinto beans 80 degrees F; turnip greens 110 degrees F; and cream of mushroom soup 110 degrees F.</p> <p>Interview with unsampled Resident C, on 07/16/12 at 5:45 PM, revealed the food was always cold. The resident further stated he/she had an ongoing request to have every meal reheated prior to room delivery.</p> <p>Interview with Resident #3, on 07/16/12 at 5:50 PM, revealed he/she had not had a hot meal since coming to the facility. He/She further stated "I just eat the food", than voice concerns later.</p> <p>Interview with unsampled Resident A, on 07/16/12 at 5:55 PM, revealed food was always cold. The resident stated he/she had to request his/her food to be reheated.</p>	F 364	<p><i>This Plan of Correction is the center's credible allegation of compliance.</i></p> <p><i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i></p> <p>3. What measures will be put in place/systemic changes made to ensure correction: Test Trays will be monitored by the Nutrition Services Manager (NSM) and Registered Dietitian (RD) 3 times per week using the Test Tray form (Test Tray Worksheet FRM 06009) alternating locations and times of meal service to identify any problems and to do root cause analysis to correct the problem starting 7/23/12. Results of the audits will be forwarded to the Executive Director weekly. Additionally Dietary Manager and Dietitian will have a monthly food committee meeting with residents to identify any problems residents have with food temperature. These concerns will be documented in committee minutes and will be resolved through root cause analysis. Also any food temperature complaint to staff will be documented on the grievance form and the RD and/or the NSM will follow up until issue is resolved as complaint arises. The NSM will in-service the dietary staff by 7/31/2012 on appropriate holding temperatures and the delivery of food at the desire temperature and procedures for heating and replacing a tray per residents request. The RD will in service all Nursing staff by 8/28/2012 of the proper delivery of food and procedure for heating and replacing tray per resident request.</p>	Completed 8/31/2012	



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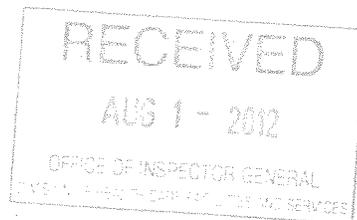
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F 364	<p>Continued From page 2</p> <p>Interview with Resident #1, on 07/16/12 at 6:20 PM, revealed the food was not hot. The resident stated he/she wished not to bother the staff to reheat the food.</p> <p>Interview with unsampled Resident B, on 07/17/12 at 3:15 PM, revealed the food was usually not hot. The resident further stated he/she did not request for the meal tray to be reheated.</p> <p>Interview with unsampled Resident D, on 07/17/12 at 3:40 PM, revealed the resident ate in their room and usually the meal served was cold.</p> <p>Interview with the Dietary Manager, on 07/16/12 5:40 PM, revealed the food served to the residents was not at an acceptable temperature. She stated the food left the tray line at an acceptable temperature, and the temperature should be maintained for the residents. The Dietary Manager stated the pinto beans should have been in a bowl to hold the temperature longer. She further stated if the food cart was not served immediately the food would lose it's temperature. The Dietary Manager revealed test tray audits are preformed every week; however, she could not provide any documented evidence that this was done.</p> <p>Interview with the Registered Dietician, on 07/17/12 at 4:15 PM, revealed the Dietary Manager was responsible for performing a test tray once a week. She further stated the system for monitoring the results are shared once a month in the Performance Improvement Meeting.</p>	F 364	<p><i>This Plan of Correction is the center's credible allegation of compliance.</i></p> <p><i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i></p> <p>4 How the facility plans to monitor its performance to make sure the solutions are sustained.</p> <p>The NSM and/or the RD will bring all the information regarding food temperatures From the test tray audits and the food committee meeting minutes to the monthly Performance improvement (PI) meeting for review to ensure that all residents receive food at the desired temperature. The Performance Improvement committee will continue to monitor this process until it determines compliance is sustained.</p>	<p>Completed 8/31/2012</p>
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F 364	Continued From page 3 This information was relayed verbally even though it should be documented on a Test Tray Form. She further stated she was responsible for monitoring the trayline temperatures at the point of service.	F 364			

