

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

PRINTED: 08/26/2020
FORM APPROVED
OMB NO. 0938-0391

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 135125 | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 06/22/2020 |
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| NAME OF PROVIDER OR SUPPLIER CREEKSIDE TRANSITIONAL CARE AND REHABILITATION | STREET ADDRESS, CITY, STATE, ZIP CODE 1351 WEST PINE AVENUE MERIDIAN, ID 83642 |
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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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| E 000 | <p>Initial Comments</p> <p>A COVID-19 Focused Emergency Preparedness Survey was conducted by the Centers for Medicare & Medicaid Services (CMS) on June 22, 2020. The facility was found to be in compliance with 42 CFR 483.83 related to E-0024 (b)(6).</p> | E 000 | | |
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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
| Electronically Signed | | 07/06/2020 |

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 000 | INITIAL COMMENTS The following reflects the findings of a COVID-19 Focused Infection Control Survey, for implementation of CMS and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19. The survey was conducted by the Centers for Medicare & Medicaid Services (CMS) between June 18 - 22, 2020 and does not reflect a full inspection of the regulations found at 42 CFR §483. | F 000 | | |
| F 812 SS=E | <p>Total census 111.</p> <p>Food Procurement, Store/Prepare/Serve-Sanitary CFR(s): 483.60(i)(1)(2)</p> <p>§483.60(i) Food safety requirements. The facility must -</p> <p>§483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities. (i) This may include food items obtained directly from local producers, subject to applicable State and local laws or regulations. (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. (iii) This provision does not preclude residents from consuming foods not procured by the facility.</p> <p>§483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety. This REQUIREMENT is not met as evidenced by: Based on observation, interview and record</p> | F 812 | Corrective actions taken for those | 7/10/20 |

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| F 812 | <p>Continued From page 1</p> <p>review, the facility failed to follow proper sanitation practices in the monitoring of the automatic dishwasher temperatures to ensure sanitization of food service and preparation of equipment. This deficient practice had the potential for potentially contaminated dishes and kitchen equipment to lead to the spread of pathogens.</p> <p>Findings: Observed kitchen staff A on 06/18/2020 at 10:58 AM wearing a source mask while washing dishes from the breakfast service. During a concurrent interview, Staff A described the process for testing the dishwasher temps and frequency of checks as "every day prior to washing." When asked if the temperature checks were logged, Staff A pointed to a log posted on the wall near the doorway. Observed Staff A complete a random temperature check. A thermometer was placed in a rack and run through the dishwasher. Once the cycle was completed, Staff removed the thermometer, it read "169" degrees F. When asked how hot it should be, Staff A responded "160".</p> <p>Reviewed facility record titled "High Temperature Dishwasher Log" hanging in the kitchen for the month of June 2020 on 6/18/2020. Entries on it read that temperature checks were completed for the "AM" and "Mid-day" times for June 1st through June 5th, June 8th through June 12th, and June 16th and 17th. A single "AM" entry was read for June 15th, and June 18th. All "PM" entries were blank. All week-end entries for June 6th and 7th, and June 13th and 14th were blank for all three times, and the June 15th "Mid-day" entry was also blank.</p> | F 812 | <p>residents who may have been affected by this deficiency:</p> <p>Dietary staff member who did not document water temperatures for the dishwasher was in serviced on the facilities policy on temperature and chemical checks and documentation of water temperatures for the dishwasher.</p> <p>How the facility will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken:</p> <p>All resident's receiving care in the facility have the potential to be affected.</p> <p>Measures that will be put into place to ensure that this deficiency does not recur:</p> <p>All kitchen staff will be educated on the facilities policy on temperature and chemical checks and documentation of water temperature for the dishwasher.</p> <p>Measures that will be implemented to monitor the continued effectiveness of the corrective action taken to ensure that this deficiency has been corrected and will not recur:</p> <p>The dietary manager or designee will audit the water temperature log daily x4 weeks to ensure that water temperatures are being taken and documented correctly on the water temperature log. All negative findings will be reported to the administrator, and reported in the monthly</p> | | |

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| F 812 | <p>Continued From page 2</p> <p>The Dietary Manager (DM) stated in an interview on 06/18/2020 at 11:05 AM, that he had noticed there were missing entries as well. He stated there was a new employee, Staff B who "was struggling with his duties." He reported that he had held an in-service on this topic this week. When asked to show the surveyor a record of the in-service, the DM provided a blank document titled "In service for Kitchen staff". The "purpose" of this document read it was "to prepare you for your shift and possibility of shortages that we experience with the on-going pandemic." Emboldened questions were listed with space for employees to write an explanation or their understanding of each question. The final question on the document read "Why are control logs important and when do you fill them out?" Below the final question was a line that read "Signed _____" and "completed on ____". When asked to provide a log of attendance, or a copy of the in-service for staff B, the DM stated that he did not keep a log of the in-service, or the documents for any employees. He stated the document was for discussion purposes only. He further stated he had not been able to in-service the "new employee" as he was out sick.</p> <p>During a phone interview with the Infection Preventionist (IP) on 06/19/2020 at 02:30 PM, in the presence of the Administrator, the IP stated that kitchen staff B who was out sick, had been tested for COVID-19 on 06/16/2020. The test results had just come back, and were negative.</p> <p>Dietary Policy and Procedure revised on 01/2020 and titled "Temperature and Chemical Checks, Dishwasher" reviewed on 06/19/2020. It read, "It is the policy of this facility to maintain proper dishwasher temperature ... to ensure proper</p> | F 812 | QAPI meeting. | | |

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| F 812 | Continued From page 3 cleaning and sanitation of food service and preparation equipment". It further read that it was the employee's responsibility to "check and document dishwasher temperatures ... on a daily basis, following meal service, but prior to the washing of dishes and meal preparation equipment" and that the supervisor was responsible for monitor and compliance with the dishwasher temperatures. | F 812 | | | |