

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 150162	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 07/05/2012
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NAME OF PROVIDER OR SUPPLIER FRANCISCAN ST FRANCIS HEALTH - INDIANAPOLIS	STREET ADDRESS, CITY, STATE, ZIP CODE 8111 S EMERSON AVE INDIANAPOLIS, IN 46237
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S0000	<p>This visit is for a State hospital complaint investigation.</p> <p>Complaint #: IN00109691 Substantiated: State deficiency is cited.</p> <p>Dates of Survey: 7/5/2012</p> <p>Facility Number: 004972</p> <p>Surveyor : Albert Daeger, Medical Surveyor</p> <p>QA: claughlin 07/19/12</p>	S0000		

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

TITLE

(X6) DATE

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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S0610	<p>410 IAC 15-1.5-2 INFECTION CONTROL 410 IAC 15-1.5-2(f)(3)(D)(x)</p> <p>(f) The hospital shall establish an infection control committee to monitor and guide the infection control program in the facility as follows: (3) The infection control committee responsibilities shall include, but not be limited to, the following: (D) Reviewing and recommending changes in procedures, policies, and programs which are pertinent to infection control. These include, but are not limited to, the following:</p> <p>(x) A program of food preparation and storage for all personnel involved in food handling which includes, but is not limited to, the following:</p> <p>(AA) Storage of employee food in patient refrigerators.</p> <p>(BB) Medications in nutrition refrigerators.</p> <p>(CC) Refrigerator and freezer temperature monitoring.</p> <p>Based on documentation review and interview, the facility failed to ensure the Dietary Department was complying with basic sanitation practices specified in 410 IAC 7-24, Retail Food Establishment Sanitation Requirements and hospital Food & Nutrition Services</p>	S0610	<p>Response for Findings 3, 4 and 5: Re-education of the Food & Nutrition Services staff on the hand washing policy was completed by Food & Nutrition Services Management by 7/31/12 (See Exhibit 1.) Responsible Person: Operations Manager Date of Completion: 7/31/12 Compliance monitoring for hand washing will be conducted on a monthly basis by Food & Nutrition</p>	07/31/2012			

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	<p>Department policies.</p> <p>Findings included:</p> <p>1. St. Francis Hospital Food & Nutrition Services Department policies last reviewed March, 2012 indicates the Production Management is responsible for the procurement of food, supplies, and equipment. The Retail Food Establishment Sanitation Requirements, Title 410 IAC 7-24 (Effective date November 13, 2004) will be the basis of the procedures in procuring produced foods.</p> <p>2. 410 IAC 7-24-129, When to wash hands, states, " Food employees shall clean their hands and exposed portions of their arms as specified under section 128 of this rule immediately before engaging in food preparation, including working with exposed food, clean equipment and utensils, and unwrapped single-service and single-use articles and the</p>		<p>Services Management in accordance with the 24 Point Food Safety audit tool. (See Exhibit 2.) Responsible Person: Operations Manager Date of Completion: 7/31/12 Results of the audit will be reported by the Operations Manager on a monthly basis and given to the Food & Nutrition Services Director for review. Responsible Persons: Operations Manager and Director, Food & Nutrition Services Date of Completion: 7/31/12</p> <p>Response for Findings 7 and 8: Re-education of the Food & Nutrition Services staff on the thermometer calibration policy was conducted. Additional in-service was completed by Food & Nutrition Services Management by 7/31/12 (See Exhibit 3.) Responsible Person: Operations Manager Date of Completion: 7/31/12 Compliance monitoring for thermometer calibration will be conducted on a daily basis with the HACCP Thermometer Calibration Log (See Exhibit 4.) Responsible Person: Operations Manager Date of Completion: 7/31/12 The log will be reviewed by the Operations Manager and results given to the Food & Nutrition Services Director for review on a monthly basis. Responsible Persons: Operations Manager and Director, Food & Nutrition Services Date of Completion: 7/31/12</p>	

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	<p>following: After touching bare human body parts other than clean hands and clean, exposed portions of arms; After handling soiled surfaces, equipment, or utensils; During food preparation, as often as necessary to remove soil and contamination and to prevent cross-contamination when changing tasks; When switching between working with raw food and working with ready-to-eat food; Before touching food or food-contact surfaces; Before placing gloves on hands; and After engaging in other activities that contaminate the hands. "</p> <p>3. At 11:00 AM, staff member #5 was observed routinely touching his/her face with gloved hands and then followed up by handling bread and other food items with the same gloves. The staff member's beard guard was observed falling down below his/her chin and the staff member had to correct the beard guard on his/her face.</p>		<p style="text-align: center;"><u>Response for</u></p> <p>Finding 11: Re-education of the Food & Nutrition Services staff on the hand washing policy was completed by Food & Nutrition Services Management on 7/16/12 (See Exhibit 1.) The department also implemented barriers to touching of foods by providing tongs and spoons to be used to reduce the frequency of touching of ready to eat foods. The architectural drawings were approved by the Director of Health Care Engineering Program of the Indiana State Department of Health for the cafeteria on December 20, 2011 (see attached letter) which includes this salad bar area as identified on the state approved drawing attached. (See attached drawing.) There are two handwashing sinks for employees - one 25 feet (13 foot steps) from the salad bar area and the other 32 feet (14 foot steps) that staff have been directed to utilize.</p> <p>We were just surveyed by the Indiana State Department of Health for our licensure survey (8/6-10/12) and there were no citations in this area.</p> <p>Responsible Person: Operations Manager Date of Completion: 7/16/12 Please review Exhibit 5 (Indiana State Department of Health approval number H1149117) Responsible Person:</p>		

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	<p>4. At 11:10 AM on 7/5/2012, staff member #5 indicated his/her hands should have been washed and a new pair of gloves should have been put on before food was handled with his/her gloved hands. The staff member indicated he/she was using the wrong type of beard guard.</p> <p>5. At 11:15 AM, four staff members along the patient tray line in the kitchen were observed not washing their hands prior to putting on their single-use gloves. Two staff member were observed at least three times changing gloves without washing their hands between changing of the single-use gloves.</p> <p>6. 410 IAC 7-24-254, Accuracy of temperature measuring devices, states, "Food temperature measuring devices that are scaled in Fahrenheit shall be accurate to plus or minus two (2) degrees Fahrenheit in the intended range of use. Food temperature measuring</p>		<p>Director, Food & Nutrition Services Date of Completion: 7/5/12</p>		

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	<p>devices shall be calibrated in accordance with manufacturer's specifications as necessary to ensure their accuracy. "</p> <p>7. At 11:20 AM on 7/5/2012, staff member #4 was observed removing baked fish from the oven and tested it at 135 F. The staff member then took the fish to the cafeteria and placed it on cafeteria serving line even after the staff member tested the fish at a temperature less then the required cooking temperature of 155 F. However, the fish was removed from the line and was tested with the inspector's digital thermometer and baked fish read 155 F. Staff member #4 checked his/her dial thermometer for proper calibration and it was reading at 24 F. Then 4 more thermometers were checked for proper calibration of 32 F in a cup of ice water. Two of those 4 dial thermometers tested at 28 F. Therefore, 3 of 5 thermometers that were being utilized by the cooks were not calibrated +/- 2 F of the required 32</p>			

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	<p>F while being checked in a cup of ice water.</p> <p>8. At 11:40 AM on 7/5/2012, staff member #4 confirmed the baked fish should have not been taken out to the cafeteria serving line until his/her thermometer read at least 155 F. The staff member indicated he/she forgot to calibrate his/her dial thermometer as required by management.</p> <p>9. 410 IAC 7-24-343, Hand washing sinks; numbers and capacities, states, " A number of hand washing sinks necessary for their convenient use by employees in areas specified under section 344 of this rule. "</p> <p>10. 410 IAC 7-24-344, Hand washing facility; location, states. " A hand washing facility shall be accessible at all times and located as follows: To allow convenient use by employees in: food preparation; food dispensing; and warewashing areas. "</p>			

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	11. At 12:35 PM on 7/5/2012, the salad station was inspected. The station was isolated in the middle of the cafeteria. The salad station was observed to have a staff member making assorted meals on requests in frying pans. The salad station does not have a hand washing sink, located in an area of food preparation.			