

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 151324	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 11/10/2011
NAME OF PROVIDER OR SUPPLIER JASPER COUNTY HOSPITAL			STREET ADDRESS, CITY, STATE, ZIP CODE 1104 E GRACE ST RENSSELAER, IN47978		
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S0000	<p>This visit was for a standard licensure survey.</p> <p>Facility Number: 005072</p> <p>Survey Date: 11/9&10/2011</p> <p>Surveyors: ReBecca Lair, LCSW Medical Surveyor</p> <p>Jacqueline Brown, RN Public Health Nurse Surveyor</p> <p>Albert Daeger Laboratorian/Medical Surveyor</p> <p>QA: cloughlin 11/28/11</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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S0322	<p>410 IAC 15-1.4-1(c)(6)(H)</p> <p>(c) The governing board is responsible for managing the hospital. The governing board shall do the following: (6) Require that the chief executive officer develops policies and programs for the following:</p> <p>(H) Requiring all services to have policies and procedures that are updated as needed and reviewed at least triennially. Based on document review, the hospital failed to ensure all dietary policies are reviewed and updated as needed for 2 instances.</p> <p>Findings included:</p> <p>1. Policy number IC-13, Informing Patients/Residents Regarding The Consumption of Under-Cooked Eggs was dated November 2002 and did not have a date entry next to where the policy was last revised. However, the policy was reflecting under-cooked eggs can be served to patients in a hospital, even though the policy differs from Retail Food Establishment Sanitation Requirements 410 IAC 7-24.</p> <p>2. Retail Food Establishment Sanitation Requirements 410 IAC 7-24-46 states, "Highly susceptible population means a</p>	S0322	<p>1 - 3 Policy IC-13 has been revised. The acute care highly susceptible population will no longer receive under cooked or raw foods of animal nature. Completion Date: 11/10/11 Responsible Party: Dietary Director4. Jasper County Hospital Policy V-15 addresses the dating and usage of food items. The Statement of Deficiencies discusses dish machine water temperatures. The Jasper County Hospital policy relating to water temperatures is V-6. The Hospital uses a single tank, conveyor type dish machine and Policy V-6 has been revised to comply with temperature measuring requirements. Temperatures will be captured using an irreversible thermometer and logged once per dishwasher cycle. Completion Date: 11/10/11 Responsible Party: Dietary Director5. Double walled salad crocks with freezable gel</p>	12/10/2011	

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	<p>group of persons who are more like than other populations to experience foodborne disease because they are immunocompromised or adults who are at least 65 years of age and in a hospital."</p> <p>3. Retail Food Establishment Sanitation Requirements 410 IAC 7-24-182, Cooking of Raw animal food indicates any raw animal food, such as: raw egg or partially cooked food, such as lightly cooked fish, soft cooked eggs may not be served to highly susceptible population..</p> <p>4. Policy number V-15, Dating and Usage of Food Items last revisit August 2009 Part 3 Food Handling Practices section 2 states, "Potentially hazardous foods must be kept out of the temperature danger zone (45 f to 140 f)." Section 9 states, "Cook Poultry, stuffed meat, stuffing, and pork to an internal temperature of 165 f. Other meats should be could to an internal temperature of 150 f. Part 4, Foodservice Sanitation & Health Standards section 4 states, "Dishmachine water temperatures need to be 165 f to 185 f for the wash, and 180 f to 196 f for the final rinse." Policy number V-15 has not been revised to meet the requirements of 410 IAC 7-24.</p> <p>5. Retail Food Establishment Sanitation Requirements 410 IAC 7-24-187 states,</p>		<p>insulation will be purchased.Completion Date: 11/10/11. The crocks will be used on the salad bar, maintaining temperature at 41 degrees or less. Dietary Department employee will check salad bar food temperatures when salad bar is in use.Completion Date: 12/10/11.Responsible Party: Dietary Director6 Hospital Dietary Policy & Procedure IC-13 has been revised to provide no undercooked eggs to highly susceptible population. Completion Date 11/10/11Responsible Party: Dietary Director7. Jasper County Hospital Policy V-15 addresses the dating and usage of food items. The Statement of Deficiencies discusses dish machine water temperatures. The Jasper County Hospital policy relating to water temperatures is V-6. The Hospital uses a single tank, conveyor type dish machine and Policy V-6 has been revised to comply with temperature measuring requirements. Temperatures will be captured using an irreversible thermometer and logged once per dishwasher cycle.Completion Date: 11/10/11 Responsible Party: Dietary Director</p>		

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	<p>potentially hazardous food shall be maintained as follows: (1) At one hundred thirty-five (135) degrees Fahrenheit or above, except that roasts cooked to a temperature and for a time specified under section 161(b) of this rule or reheated as specified in section 167(e) of this rule may be held at a temperature of one hundred thirty (130) degrees Fahrenheit. (2) At a temperature specified in the following: (A) At forty-one (41) degrees Fahrenheit or less." Therefore, the hospital policy did not meet 410 IAC 7-24 hot and cold holding requirements and/or the temperature danger zone of 41 to 135 degrees F.</p> <p>6. Retail Food Establishment Sanitation Requirements 410 IAC 7-24-182 states, "Except as Specified under subsections (b), (c), and (d), raw animal foods, such as eggs, fish, meat, poultry, and foods containing these raw animal foods, shall be cooked to heat all parts of the food to a temperature and for a time that complies with one (1) of the following methods based on the food that is being cooked: (1) One hundred forty-five (145) degrees Fahrenheit or above for fifteen (15) seconds for the following: (A) Raw shell eggs that are broken and prepared in response to a consumer's order and for immediate service. (B) Except as</p>				

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	<p>specified under subdivisions (2) and (3), and subsection (b), fish and meat, including pork. (2) One hundred fifty-five (155) degrees Fahrenheit for fifteen (15) seconds or the temperature specified in the chart in subsection (b) that corresponds to the holding time for: (A) injected meats; (B) raw eggs such as eggs that are pooled, that are not prepared as specified under subdivision (1); and (C)comminuted meat or fish. (3) One hundred sixty-five (165) degrees Fahrenheit or above for fifteen (15) seconds for poultry, game animals, stuffed fish, stuffed meat, stuffed pasta, stuffed poultry, or stuffing containing fish, meat, or poultry." Comminuted meat (ground meat) has a requirement in 410 IAC 7-24 to be cooked to 155 f which the hospital policy V-15 indicates 150 f was an acceptable cooking temperature. The hospital did not revise policy V-15 to meet the cooking temperature requirements noted in 410 IAC 7-24.</p> <p>7. Retail Food Establishment Sanitation Requirements 410 IAC 7-24-284 states, "The temperature of the wash solution in spray type warewashing machines that use hot water to sanitize may not be less than: (1) for a stationary rack, single temperature machine, one hundred sixty-five (165) degrees Fahrenheit; (2) for a stationary rack, dual temperature</p>						

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	<p>machine, one hundred fifty (150) degrees Fahrenheit; (3) for a single tank, conveyor, dual temperature machine, one hundred sixty (160) degrees Fahrenheit; or (4) for a multi-tank, conveyor, multi-temperature machine, one hundred fifty (150) degrees Fahrenheit." 410 IAC 7-24-285 states, "Except as specified in subsection (b), in a mechanical operation, the temperature of the fresh hot water sanitizing rinse as it enters the manifold may not be more than one hundred ninety-four (194) degrees Fahrenheit, or less than: (1) for a stationary rack, single temperature machine, one hundred sixty-five (165) degrees Fahrenheit; or (2) for all other machines, one hundred eighty (180) degrees Fahrenheit." The food code requires the wash temperature be between 150 and 165 not 165 to 185 as per policy V-15. The Retail food code does not require final rinse temperature to exceed 194 f which differs from policy V-15. Therefore, the facility did not revise the mandatory wash and final rinse temperature requirements to meet 410 IAC 7-24.</p>				

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S0554	<p>410 IAC 15-1.5-2(a)</p> <p>(a) The hospital shall provide a safe and healthful environment that minimizes infection exposure and risk to patients, health care workers, and visitors.</p> <p>Based on observation and document review, the facility failed to maintain 2 of 3 hand washing sinks in a way that would not result with a person contaminating their hands from a laboratory test that was being done in the Laboratory.</p> <p>Findings included:</p> <ol style="list-style-type: none"> The lab was toured at 1:55 PM on 11/9/2011. Two locations in the lab where the staff conduct blood test were observed with hand washing sinks. One hand washing sink near the centrifuge was observed with assorted antibody screen test being conducted within inches of the hand washing sink. The paper towel dispenser and the soap dispenser were located behind a microscope, centrifuge, and assorted blood gel tests. A person would have to reach over antibody screen tests that were being conducted within inches of the handwashing sink. The hand washing sink located in the chemistry room was observed with the chemistry work station next to the hand washing station. Several tubes of lab 	S0554	<p>Testing materials have been relocated away from the two sinks. Towel and soap dispenser access is now unobstructed. Within 90 days both sinks will be removed/taken out of use. Laboratory Director will monitor use of sinks on a weekly basis until sinks removed from service. Completion Date 12/10/11 Responsible Party: Laboratory Director</p>	12/10/2011	

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S0566	<p>specimens were located on the work station open and within 12 inches of the hand washing sink. A person would have to reach behind the water purification system to obtain a paper towel.</p> <p>3. At 2:45 PM on 11/9/2011, staff member L7 indicated the 2 hand washing sinks in question during this inspection were designated hand washing sinks for the laboratory.</p> <p>410 IAC 15-1.5-2 (e)(1)(2)</p> <p>(e) The chief executive officer, medical staff, and executive nurse shall do the following:</p> <p>(1) Be responsible for the implementation of successful corrective action plans in affected problem areas.</p> <p>(2) Provide for appropriate infection control input into plans for renovation and new construction to ensure awareness of federal, state, and local rules that affect infection control practices as well as plan for appropriate protection of patients and employees during construction or renovation.</p> <p>Based on observation and staff interview, the facility failed to provide an environment that may not result in a hazard to patients, public, or employees in 1 of 8 (Radiology Outpatient Department Corridor) areas toured.</p>	S0566	Permanent ceiling has been installed in north/south Radiology Department corridor. Jasper County Hospital revised the Interim Life Safety Measures Policy to require temporary or permanent ceiling in all	11/17/2011	

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	<p>Findings:</p> <p>1. While on tour of the facility on 11/10/11 at approximately 11:45 AM, accompanied by Personnel P1 and P14, it was observed in the Radiology Outpatient Department Corridor that construction was ongoing and ceiling tiles and/or ceiling material had been removed leaving the entire ceiling area uncovered with wires exposed. Patients, visitors, staff, and construction workers were utilizing this hallway, with some patients being wheeled in wheelchairs and/or on carts.</p> <p>2. Personnel P1 was interviewed on 11/10/11 at approximately 11:47 AM and confirmed the above-mentioned exposed ceiling may pose an infection control risk and/or hazard for patients, visitors, staff, and construction workers.</p>		<p>construction areas shared by public and staff be replaced on a daily basis. Completion Date: 11/17/11. Responsible Party: Vice President of Support Services</p>		

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S0610	<p>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 document review and interview, the facility failed to ensure the kitchen was not serving under-cooked food to patients in the hospital.</p> <p>Findings included:</p> <p>1. Dietary, Infection Control policy Title, Informing Patients/Residents Regarding The Consumption of Under-Cooked Eggs IC-13 states, "Every patient or resident</p>	S0610	1 - 5 Policy IC-13 has been revised. The acute care highly susceptible population will no longer receive under cooked or raw foods of animal nature.Completion Date: 11/10/11Responsible Party: Dietary Director	11/10/2011	

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	<p>who orders an under-cooked egg item will receive a card on their meal tray that states the following: An under-cooked egg is that in which any part of the egg is still liquid or running, such as a poached or over-easy fried egg. Eating an under-cooked egg can increase your risk of getting ill from the egg."</p> <p>2. Retail Food Establishment Sanitation Requirements 410 IAC 7-24-182, Cooking of Raw animal food indicates any raw animal food, such as: raw egg or partially cooked food, such as lightly cooked fish, soft cooked eggs may not be served to highly susceptible population..</p> <p>3. Retail Food Establishment Sanitation Requirements 410 IAC 7-24-46 states, "Highly susceptible population means a group of persons who are more like than other populations to experience foodborne disease because they are immunocompromised or adults who are at least 65 years of age and in a hospital."</p> <p>4. At 12:00 PM on 11/9/2011, staff member L3 indicated that the procedure of serving eggs to order is not publicized but under-cooked eggs can be served to any patient in the hospital with a consumer advisory warning card attached to the tray.</p>				

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S1104	<p>5. At 12:10 PM on 11/9/2011, 4 crates of shelled eggs were observed in the kitchen's walk-in cooler. Staff member L3 confirmed the shell eggs stored in the walk-in cooler are the eggs used for the patients and residents for eggs to order (including soft under-cooked eggs).</p> <p>410 IAC 15-1.5-8(a)(1)(A)(B)</p> <p>(a) The hospital shall be constructed, arranged, and maintained to ensure the safety of the patient and to provide facilities for services authorized under the hospital license as follows:</p> <p>(1) The plant operations and maintenance service, equipment maintenance, and the environmental service shall be:</p> <p>(A) staffed to meet the scope of the services provided; and (B) under the direction of a person or persons qualified by education, training, or experience.</p> <p>Based on observation and staff interview, the facility failed to provide a safe environment in one of one instances.</p> <p>Findings:</p> <p>1. On 11-10-11 at 12pm in the presence of Employee #A2 and Employee # A8, it</p>	S1104	Permanent ceiling has been installed in north/south Radiology Department corridor. Jasper County Hospital revised the Interim Life Safety Measures Policy to require temporary or permanent ceiling in all construction areas shared by public and staff be replaced on a daily basis. Completion Date:	11/17/2011

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S1170	<p>was observed in the North/South Radiology Corridor that the drop down ceiling had been completely removed due to renovations. The ceiling area was open with exposed electrical wiring dangling to just above the height of this surveyors head and reachable from a standing position, posing a risk to patients, visitors and staff.</p> <p>2. Upon interview 11-10-11 at 12pm, both Employee #A2 and Employee #A8 indicated that this had been the known practice of contractor.</p> <p>410 IAC 15-1.5-8 (d)(4)</p> <p>(d) The equipment requirements are as follows:</p> <p>(4) Electrical safety shall be practiced in all areas.</p> <p>Based on observation, document review, and staff interview, the facility failed to ensure 3 box fans located in the kitchen were directly plugged into the wall outlets per policy.</p> <p>Findings included:</p> <p>1. Jasper County Hospital Safety Plan Article III section F states, "Extension cords shall not be used except in emergencies. Such cords shall be of the 3-wire grounded type with #16 gauge or</p>	S1170	<p>11/17/11.Responsible Party: Vice President of Support Services</p> <p>The two box fans located in the warewashing room of the kitchen were removed on 11/14/11 and will no longer be in service.The fan located over the three compartment sink has been taken out of service. The fan will be rewired, eliminating the use of an extension cord, and placed back into service. This process will be completed by 1/10/12Responsible Party: Maintenance Director</p>	12/10/2011	

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	<p>heavier. The use of "cheater plugs" or adapters shall not occur. Extension cords shall be available for check-out at the Maintenance Department."</p> <p>2. At 11:30 AM on 11/9/2011, staff member L5 indicated he/she has told the Maintenance Department several times about it was not good practice to have the extension cord to the fan hanging within inches of the 3-compartment sink.</p> <p>3. At 11:20 AM on 11/9/2011, the kitchen was toured. The 3-compartment sink located opposite of the kitchen ovens was observed with a white box fan plugged into another pre-fab orange extension cord. The socket side that was wired on the heavy gauge orange electric cord was made for a grounded plug; however, the pre-fab plug on the orange cord was 2-prong not a grounded plug adapter.</p> <p>4. At 11:45 AM on 11/9/2011, two box fans were observed plugged into a brown extension cord and then plugged into the wall outlet. The two box fans were located in the warewashing room of the kitchen.</p> <p>5. All 3 box fans plugged into extension cords are not be using for an emergency purpose as defined by the hospital's safety</p>				

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

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FORM APPROVED

OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 151324	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED 11/10/2011
NAME OF PROVIDER OR SUPPLIER JASPER COUNTY HOSPITAL			STREET ADDRESS, CITY, STATE, ZIP CODE 1104 E GRACE ST RENSSELAER, IN47978		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PERCEDED 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	
	plan.				