

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

PRINTED: 08/16/2021  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>315047</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b>  <b>07/10/2021</b>
NAME OF PROVIDER OR SUPPLIER  <b>WYNWOOD REHABILITATION AND HEALTHCARE CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1700 WYNWOOD DRIVE</b> <b>CINNAMINSON, NJ 08077</b>		
(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	
F 000	INITIAL COMMENTS  COMPLAINT#: NJ146553  CENSUS: 97  SAMPLE SIZE: 3  THE FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE REQUIREMENTS OF 42 CFR PART 483, SUBPART B, FOR LONG TERM CARE FACILITIES BASED ON THIS COMPLAINT VISIT.	F 000			
F 804 SS=D	Nutritive Value/Appear, Palatable/Prefer Temp CFR(s): 483.60(d)(1)(2)  §483.60(d) Food and drink Each resident receives and the facility provides-  §483.60(d)(1) Food prepared by methods that conserve nutritive value, flavor, and appearance;  §483.60(d)(2) Food and drink that is palatable, attractive, and at a safe and appetizing temperature. This REQUIREMENT is not met as evidenced by: C#: NJ146553  Based on observations, interviews, and review of other facility documents on 7/10/2021, it was determined that the facility failed to serve hot and cold foods at acceptable temperatures. The facility also failed to follow its policy titled "Food: Preparation, Healthcare Services Group, Inc. and its subsidiaries, HCSG Policy 016." This deficient practice was observed in 2 of 2 test trays and reported by 2 of 3 residents interviewed by the	F 804	Submission of this Plan of Correction does not constitute an admission or agreement by the provider on the statement of deficiencies. This plan of Correction is prepared and submitted because of requirements under State and Federal law. Please accept this plan of correction as our credible allegation of compliance.	7/12/21	

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

TITLE

(X6) DATE

Electronically Signed

07/28/2021

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 804	<p>Continued From page 1</p> <p>Surveyor and was evidenced by the following:</p> <p>During a tour on 7/10/2021 at 8:43 a.m., the Surveyor interviewed Resident #1, who stated the food temperature is not consistent. Resident #1 explained foods that should be hot were cold, and foods that should be cold were not.</p> <p>The Surveyor interviewed a second resident (Resident #2) during the tour at 9:22 a.m., Resident #2 stated the hot foods are cold.</p> <p>Review of the Medical Records were as follows:</p> <p>1. According to the "Admission Record (AR)," Resident #1 was initially admitted on [REDACTED] with diagnoses which included but were not limited to [REDACTED].</p> <p>According to the Minimum Data Set (MDS), an assessment tool dated [REDACTED], Resident #1 had a Brief Interview for Mental Status (BIMS) score of [REDACTED], indicating Resident #1 was [REDACTED]. The MDS also indicated the resident required staff assistance for Activities of Daily Living (ADLs).</p> <p>2. According to the "AR," Resident #2 was initially admitted on [REDACTED] with diagnoses which included but were not limited to Cerebral Infraction due to [REDACTED].</p> <p>According to the MDS dated [REDACTED], Resident</p>	F 804	<p>The food items that were not within the correct temperature scale were immediately discarded. Resident #1 and #2 were given trays with correct temperatures of all food items. Dietary department was in-serviced on the correct temperature for all food items. All residents have the potential to be affected. Random test tray audits to be completed weekly for 4 weeks and then monthly for three months by the Food Service Director/Designee Results to be presented in the Quality Assurance Performance Improvement meetings for one quarter.</p>	

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F 804	<p>Continued From page 2</p> <p>#2 had a BIMS score of 1 [REDACTED] indicating Resident #2 was [REDACTED]. The MDS also indicated the resident required staff assistance with ADLs.</p> <p>On 7/10/2021 at 11:40 a.m., the Surveyor calibrated the digital thermometer in accordance with the manufacturers' instructions in the presence of the Cook.</p> <p>On 7/10/2021 at 12:25 p.m., the Cook sent two test trays from the kitchen, one regular and one puree, in an insulated food truck on the [REDACTED] Unit; the Surveyor checked the test trays temperatures on a regular and a puree diet tray as follows:</p> <p>At 12:35 p.m., the regular diet tray contained Rice 123-degree F; Veggies 126-degree F; Pudding 64.4-degree F; Cranberry Juice 53.5-degree F; and Milk 57.7-degree F.</p> <p>At 12:40 p.m., the puree diet tray contained Corn 59.3-degree F; Mashed potatoes 121-degree F; chicken 133-degree F; Veggies 128-degree F and Applesauce 73-degree F.</p> <p>During an interview on 7/10/2021 at 2:10 p.m., in the Food Service District Manager (FSDM) presence, the Cook stated cold foods should be served at 38-degree F, and hot foods should be served at 165-degree F or better.</p> <p>Review of facility policy titled "Food: Preparation, Healthcare Services Group, Inc. and its subsidiaries, HCSG Policy 016" revised 9/2017, revealed the following: Under "Policy Statement" included "All foods are prepared in accordance with the FDA Food Code." Under "Procedures"</p>	F 804			

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F 804	Continued From page 3 included "4. The Dining Services Director/Cook(s) will be responsible for food preparation techniques which minimize the amount of time that food items are exposed to temperatures greater than 41 degrees F and/or less than 135 degrees F, or per state regulation ...13. All foods will be held at appropriate temperatures, greater than 135 degree F (or as state regulation requires) for hot holding, and less than 41 degree F for cold food holding."	F 804			
F 812 SS=D	N.J.A.C.: 8:39-17.4 (a) 2 Food Procurement,Store/Prepare/Serve-Sanitary CFR(s): 483.60(i)(1)(2)  §483.60(i) Food safety requirements. The facility must -  §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.  §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:	F 812		7/12/21	

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F 812	<p>Continued From page 4 C#: NJ146553</p> <p>Based on observations, interviews, and review of other facility documents on 7/10/2021, it was determined that the facility failed to perform appropriate hygiene protocol to prevent contamination by not wearing hairnets in the kitchen. The facility also failed to follow its policy titled "Food: Preparation, Healthcare Services Group, Inc. and its subsidiaries, HCSG Policy 016." This deficient practice was evidenced by the following:</p> <p>On 7/10/2021 at 11:40 a.m., while in the kitchen calibrating the thermometer in the presence of the Cook, the Surveyor observed a food service worker ( FSW) with short hair wearing no hair net while working in the kitchen area among hot and cold foods.</p> <p>The Surveyor observed a second FSW with dreadlocks to his shoulders, pulled back in a ponytail and a hair/headband around his head, wearing no hair net while working in the kitchen area among hot and cold foods.</p> <p>During an interview on 7/10/2021 at 12:00 p.m., FSW #1 (with the short hair) stated he took off the hair net because it was too sweaty on his head. FSW #1 also stated he was required to wear a hairnet while in the kitchen.</p> <p>During an interview on 7/10/2021 at 12:02 p.m., FSW #2 (with the dreadlocks) stated he doesn't have to wear a hairnet because he wears a hairband or cap to keep his hair back. FSW #2 also stated hair nets are too small and don't fit his hair.</p>	F 812	<p>Submission of this Plan of Correction does not constitute an admission or agreement by the provider on the statement of deficiencies. This plan of Correction is prepared and submitted because of requirements under State and Federal law. Please accept this plan of correction as our credible allegation of compliance.</p> <p>FSW #1 and FSW #2 immediately donned hair nets. Dietary department was in-serviced on the use of hairnets in the kitchen.</p> <p>All residents have the potential to be affected.</p> <p>Weekly audits ensuring hair nets are being worn to be completed for 4 weeks and then monthly for 3 months by the Food Service Director/ Designee. Results to be presented in the Quality Assurance Performance Improvement meetings for one quarter.</p>		

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F 812	Continued From page 5  Review of facility policy titled "Food: Preparation, Healthcare Services Group, Inc. and its subsidiaries, HCSG Policy 016" revised 9/2017, revealed the following: Under "Policy Statement" included "All foods are prepared in accordance with the FDA Food Code." Under "Procedures" included " ...2. Dining Services staff will be responsible for food preparation procedures that avoid contamination by potentially harmful physical, biological, and chemical contamination.  N.J.A.C. 8:39-17.2 (g)	F 812			