

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

PRINTED: 06/09/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315228	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 02/10/2021
NAME OF PROVIDER OR SUPPLIER COMPLETE CARE AT COURT HOUSE, LLC			STREET ADDRESS, CITY, STATE, ZIP CODE 144 MAGNOLIA DRIVE CAPE MAY COURT HOUSE, NJ 08210		
(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 STANDARD SURVEY CENSUS: 93 SAMPLE SIZE: 19+ 3 closed records	F 000			
F 812 SS=E	<p>The facility is not in substantial compliance with the requirements of 42 CFR Part 483, Subpart B, for long term care facilities.</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 review of other facility documentation, it was determined that the facility failed to handle potentially hazardous foods and maintain sanitation in a safe</p>	F 812	<p>1. Identified uncovered disposables were immediately discarded. Identified kitchen equipment with debris was immediately cleaned and sanitized. Quaternary</p>	3/8/21	

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

TITLE

(X6) DATE

Electronically Signed

02/21/2021

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 812	<p>Continued From page 1</p> <p>and consistent manner designed to prevent food borne illness. This deficient practice was evidenced by the following:</p> <p>On 2/4/2021 from 8:58 AM to 9:45 AM the surveyor, accompanied by the Director of Dining Services (DODS), observed the following in the kitchen:</p> <p>1. In the dry storage area on a middle rack of a multi-tiered rack, a sleeve of plastic cups for resident use were opened and exposed. The DODS on interview stated, "They are exposed, I usually just throw them away." The DOD threw the plastic cups in the trash.</p> <p>2. A red bucket with a white label dated 2/4 and half filled with a water-like substance was observed on a lower shelf in the prep area. On interview the DODS stated, "We use a quat (quaternary ammonium compounds, potent disinfectant chemicals commonly found in disinfectant wipes, sprays and other household cleaners that are designed to kill germs) sanitizer to disinfect our work areas." The surveyor requested the DODS to perform a test to determine the concentration of sanitizer. On the initial test the DODS utilized a HYDRION QT-40 test strip. Test strip instructions included "dip paper in quat solution, not foam surface for 10 seconds. Don't shake. Compare colors at once." Test strip showed 0 ppm (parts per million) on initial test. The DODS then performed a second test of the sanitizer solution using the same process and same procedure as previously done. Test strip 2 showed 0 ppm. On interview the DODS stated, "It should read at least 200 ppm, I'm going to dump it and check the sanitizing solution concentration." The DOD dumped the red bucket of sanitizer in the presence of the</p>	F 812	<p>sanitizer at 3 compartment sink received service and was increased from 200 to 400ppm.</p> <p>2. All dietary staff were re-educated on Cleaning and sanitation, Safety, Equipment, Environment and discarding of disposables not covered.</p> <p>3. Daily sanitation/safety audits will be performed by the Food Service Director or designee for a minimum of three months.</p> <p>4. FSD will report audit findings monthly to the QA committee for three months. After three months, the committee will determine if continued monitoring or further corrective action is necessary.</p> <p>Covering and securing the disposable cups, proper cleaning of equipment and the appropriate amount of sanitizer will eliminate the potential the residents will be affected</p>		

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F 812	<p>Continued From page 2 surveyor.</p> <p>3. A cleaned, and sanitized stand-up mixer was observed on a metal shelf and was covered completely with a plastic bag while not in use. The surveyor removed the plastic bag and observed unidentified food debris on the upper housing around the mixer attachment area. On interview the DODS stated, "Yes, I see where they missed cleaning it." The DODS instructed a staff member to re-clean and sanitize the stand-up mixer in the presence of the surveyor.</p> <p>The surveyor reviewed the undated facility policy, provided by the facility, titled Healthcare Services Group Cleaning and Sanitizing. Under the PURPOSE section the policy revealed the following: "To educate all new hires and current employees on the importance of and proper method for cleaning and sanitizing to ensure safety for all staff and residents." The policy further revealed under the Sanitizing heading, "Sanitizing follows cleaning. Sanitizing is the application of heat or chemicals to a properly cleaned (and thoroughly rinsed) food-contact surface. This reduces the number of microorganisms on a clean surface to safe levels," and "Sanitizer solution should be tested for correct PPM frequently. Consult manufacturer's directions for proper dilution rate for the chemical in use at your facility." Under the How to test Sanitizer Solution heading the policy revealed the following at 3. "Follow manufacturer guidelines for correct dilution/PPM for the chemical in use at your facility."</p> <p>NJAC 8:39-17.2(g)</p>	F 812			