

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

PRINTED: 12/23/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315376	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 11/01/2019
NAME OF PROVIDER OR SUPPLIER CHRISTIAN HEALTH CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 301 SICOMAC AVE WYCKOFF, NJ 07481		
(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 11/1/19 Census: 274 Sample Size: 38	F 000			
F 812 SS=D	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: Based on observation, interview and review of documentation provided by the facility, it was	F 812	1. The Director of Food and Nutrition Services removed the large sheet pans	12/1/19	

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

TITLE

(X6) DATE

Electronically Signed

11/13/2019

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>determined that the facility failed to maintain the kitchen environment and equipment in a sanitary condition to prevent contamination from foreign substances and potential for the development of foodborne illness.</p> <p>This deficient practice was evidenced by the following:</p> <p>On 10/24/19 at 9:32 AM, during the initial tour in the presence of the Director of Food and Nutrition (DFN) and the Head Cook (HC) the surveyor observed the following:</p> <ol style="list-style-type: none"> The following metal pans that the DFN told the surveyor were clean and ready for use were observed stacked on top of each other and wet nested on a rack: Eighteen large sheet pans, four one eighth-inch food pans and nine one quarter size six-inch pans. <p>The HC touched the wet nested pans and stated that the pans should have been completely air dried before they were put on the shelf for future use.</p> <ol style="list-style-type: none"> One of the facility's two steam tables had buildup of a dried brown grease like substance on four burner knobs and the on/off switch. The metal back of the steam table had been removed, which exposed the bottom shelf of the steam table. <p>There were two metal pans that contained water that was dripping from a water leak in the steam table. The shelf also contained multiple large dried food crumbs surrounding the two pans and a dried puddle of a brown colored substance.</p>	F 812	<p>that were nesting together and brought them back to the pot washer on duty to rewash and air dry properly. Remaining pans were checked and all were found to be in compliance. The employee was re-educated and counseled on the proper sanitizing procedure for air drying pans. To ensure future compliance, daily inspection of pans was added to the supervisor checklist. In addition, an air blower will be purchased to assist with the drying process. All findings will be forwarded to the Director of Food and Nutrition Services. The compliance will be monitored and incorporated into the new 2020 QAPI plan for Food and Nutrition Services. All findings will be reported to the QAPI Committee on a quarterly basis.</p> <ol style="list-style-type: none"> A replacement steam table was on order but not yet received at the time of survey. The steam table was delivered, received and will be installed by 12/1/2019. All shifts were in-serviced and re-educated on the proper cleaning of the unit in between meals. The supervisor's checklist was revised to incorporate examining the steam table after each meal. The Assistant Director of Food and Nutrition Services/Designee is to audit the checklist for compliance. All findings will be forwarded to the Director of Food and Nutrition Services. The compliance will be monitored and incorporated into the new 2020 QAPI plan for Food and Nutrition Services. All findings will be reported to the QAPI Committee on a quarterly basis. 		

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F 812	<p>Continued From page 2</p> <p>The DFN stated that the steam table had a water leak and that the Director of Maintenance (DM) had removed the back of the metal piece to repair it and then was unable to reattach it.</p> <p>The DFN told the surveyor the entire steam table should have been cleaned after each meal.</p> <p>3. The fryolator, also known as the deep fat fryer, had a moist grease like substance and moist fried food particles all over the shelf above where the fryer basket goes into the fryolator. The outside of the metal cabinet had dried white and brown grease like streaks on it.</p> <p>The HC told the surveyor that he thought that the fryolator had just been used for breakfast. A dietary aide (DA), that was standing nearby, stated that the fryolator had not been used that morning and was last used for supper the evening before.</p> <p>The DFN stated that the fryolator should be cleaned after each use.</p> <p>The DFN called the PM Kitchen Supervisor (PMKS) who told the DFN a DA on orientation had used the fryolator for dinner and did not clean it after use. The PMKS also told DFN that he did not follow up and make sure the deep fryer was cleaned before closing the kitchen the evening before.</p> <p>A review of the facility's policy dated January 2019 titled, Warewashing in Fans revealed under Procedure #6 (e) the following: "Manual dishwashing using three compartment sink will have the following components" that included "all items will be air dried after sanitizing before being</p>	F 812	<p>3. It is policy that the fryolator be cleaned after each meal. The evening cook was disciplined for not following the facility policy. The evening supervisor documented it on a closing checklist, but failed to follow up with the day supervisor. The Director of Food and Nutrition Services implemented the process that the day supervisor will do rounds at the beginning of the shift to ensure any outstanding "needs improvement" areas from the evening checklist are addressed. All findings will be forwarded to the Director of Food and Nutrition Services. The compliance will be monitored and incorporated into the new 2020 QAPI plan for Food and Nutrition Services. All findings will be reported to the QAPI Committee on a quarterly basis.</p>		

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F 812	<p>Continued From page 3 returned to storage racks."</p> <p>A review of the facility's policy dated February 2011 titled, Food purchasing Preparation and Sanitation revealed under Procedure #10 the following: "Kitchen equipment are cleaned and sanitized regularly by staff."</p> <p>On 10/25/19 at 1:15 PM, the surveyor discussed the above concerns with the Administrator and Director of Nursing. No further information was provided.</p> <p>NJAC 8:39-17.2(g)</p>	F 812			