

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>676382</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>03/11/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>FALCON RIDGE REHABILITATION</b>		STREET ADDRESS, CITY, STATE, ZIP <b>149 KLATTENHOFF LANE HUTTO, TX 78634</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0812  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Some</b>	<b>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</b>  Based on observation, interview, and record review, the facility failed to prepare and serve food under sanitary conditions in accordance with professional standards for food service in the facility's satellite kitchen. Specifically, staff did not sanitize the thermometer when taking food temperatures. This failure could place residents who receive food prepared in the facility kitchen at increased risk of food-borne illnesses. Findings: Observation on 03/10/2020 in the satellite kitchen at 12:02 p.m. revealed KS B instructed KS A on how to take food temperatures. KS A began taking the temperature of the fajita meat, after taking the temperature of the meat, he walked over to the paper towel dispenser and wiped off the thermometer with a paper towel, he then picked up a towel that was lying on the counter and wiped off the thermometer again. KS A took the temperature of the mixed vegetables, after taking the temperature of the vegetables, he wiped off the thermometer with the same paper towel he used for the fajita meat. KS A then took the temperature of the pureed green beans, after taking the temperature of the green beans, he wiped off the thermometer with the same paper towel he previously used. KS A then took the temperature of gravy, afterwards, he walked to the paper towel dispenser and got a new paper towel and wiped the thermometer. At no time did KS A use sanitizing swabs or a disinfecting solution while taking food temperatures. In an interview on 03/11/2020 at 12:12 p.m. KS A stated sanitizer was typically available in the kitchen to be used during temperature checks. In an interview on 03/11/2020 at 11:36 a.m, KM stated a sanitizing solution was used to clean the thermometer during temperature checks, and she noted it was the same sanitizing solution used to wash the dishes. The KM stated the solution was used in the satellite kitchen, and a new solution was made for each meal to take temperatures. In a follow up interview on 03/11/2020 at 12:15 p.m. KS A stated thermometers were sanitized by using a paper towel to wipe off any food particles then the thermometer is dipped in a sanitized water solution. When asked where the solution was the previous day, and why it wasn't used, KS A stated, the solution was under the sink. He stated they did not have it out, because they were concerned they might get in trouble by the kitchen manager. Record review of Nutrition Policies and Procedures dated 10/02/2017 reflected, Food/Beverage Prepared and Served by Facility Staff for Patients/Residents: All facility staff (culinary, nursing, therapy, activities, etc.) involved in the preparation and service of food adheres to safe food handling techniques. Food is served with clean, sanitized utensils. The food preparation area and utensils used to prepare food are cleaned and sanitized prior to each use, using approved washing and sanitizing techniques.		
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.