



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Health Care Quality
Office of Long Term Care Residents Protection

DHSS - DHCQ
263 Chapman Road, Ste 200, Cambridge Bldg.
Newark, Delaware 19702
(302) 421-7400

STATE SURVEY REPORT

NAME OF FACILITY: Harmony at Kent

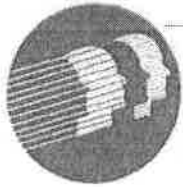
DATE SURVEY COMPLETED: March 19, 2024

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES
<p>3225</p> <p>3225.12.0</p> <p>3225.12.1</p> <p>3225.12.1.3</p>	<p>A complaint survey was conducted at this facility on March 19, 2024. The survey process included interviews and review of facility documents.</p> <p>Assisted Living Facilities</p> <p>Services</p> <p>The assisted living facility shall ensure that:</p> <p>Food service complies with the Delaware Food Code...</p> <p>Based on observations, interview, and review of other facility documentation it was determined that the facility failed to comply with the Delaware Food Code. Findings include:</p> <p>Delaware Food Code 3-305.11 Food Storage (B): FOOD in packages and working containers may be stored less than 15 cm (6 inches) above the floor on case lot handling EQUIPMENT as specified under § 4-204.122.</p> <p>3/19/2024 – 1:00 PM - During the survey of the facility, the surveyor observed boxes on the floor of the walk-in freezer, boxes are in the walk away area.</p> <p>Delaware Food Code 3-305.14 Food Preparation: During preparation, unpackaged FOOD shall be protected from environmental sources of contamination.</p> <p>3/19/2024 – 11:00 AM - During the survey of the facility, the surveyor observed three chocolate pies on food cart in the refrigerator uncovered.</p> <p>3/19/2024 – 11:02 AM - During the survey of the facility, the surveyor observed a tray of</p>	<p>A. No residents were impacted by this deficient practice.</p> <p>B. All residents have the potential to be impacted by this deficient practice.</p> <p>C. A root cause analysis of the deficient practice revealed dining associates were not educated on the requirements of Delaware Food Code 3-305.11 Food Storage. The Harmony at Kent Director of Dining will educate all dining associates on this Food Storage requirement.</p> <p>D. The Director of Dining Services/designee will audit the walk-in freezer daily for 3 weeks until 100% compliance is achieved; 3 times weekly for 3 weeks until 100% compliance is achieved; once monthly for 3 months until 100% compliance is achieved.</p> <p>The audit findings will be shared with the QA Committee.</p> <p>A. No residents were impacted by this deficient practice.</p> <p>B. All residents have the potential to be impacted by this deficient practice.</p> <p>C. A root cause analysis of the deficient practice revealed dining associates were not educated on the requirements Delaware Food Code 3-305.14 Food Preparation. The Harmony at Kent Director of Dining will educate all dining associates on this Food Preparation requirement.</p>

Provider's Signature [Signature]

Title Executive Director

Date 6/29/24



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	<p>pasta salad in bowls in the server refrigerator uncovered.</p> <p>3/19/2024 – 11:03 AM - During the survey of the facility, the surveyor observed a tray of side salads in bowls in the server refrigerator uncovered.</p> <p>Delaware Food Code 3-401.11 Raw Animal Foods: (A) Except as specified under (B) and in (C) and (D) of this section, 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 of the following methods based on the FOOD that is being cooked.</p> <p>3/19/2024 – 1:30 PM - During the survey of the facility, the surveyor observed three (3) months of requested temperature logs of meals it was discovered that the facility is missing 115 mealtime temperature logs out of 237 reviewed.</p> <p>3/19/2024 – 1:40 PM - During the survey of the facility, the surveyor interviewed R1, upon interview it was stated meat is either over cooked or "chicken specially is under cooked and bloody". Vegetables are mushy and "beets are hard as a rock". Drinkware is dirty with visible lip marks on the glasses and sometimes they don't give all the silverware. R1 stated sides are not interchangeable because they would not have enough food if the resident interchanged their sides. Food on the menu doesn't match food that is served. R1 has seen tablecloths on the floor, curtains are full of dust, and they vacuum the floor sometimes.</p>	<p>D. The Director of Dining Services/designee will audit the refrigerator for uncovered food daily for 3 weeks until 100% compliance is achieved; 3 times weekly for 3 weeks until 100% compliance is achieved; once monthly for 3 months until 100% compliance is achieved.</p> <p>The audit findings will be shared with the QA Committee.</p> <p>A. No residents were impacted by this deficient practice.</p> <p>B. All residents have the potential to be impacted by this deficient practice.</p> <p>C. Root cause analysis revealed the task of recording temperatures was not re-assigned once new dining associates joined the organization.</p> <p>C. Dining protocols were not followed, relative to quality food and service, due to staffing changes and a change in the Dining Department leadership. Additionally, the vegetable steamer was inoperable which affected the quality of the cooked vegetables. Quotes will be secured for the vegetable steamer repair.</p> <p>D. The Director of Dining Services/Designee will audit all temperature logs for completion daily for 3 weeks until 100% compliance is achieved; 3 times weekly for 3 weeks until 100% compliance is achieved; once monthly for 3 months until 100% compliance is achieved.</p> <p>The Director of Dining Services/Designee will perform a test tray to assess food quality daily for 3 weeks until 100% compliance is achieved; 3 times weekly for 3 weeks until 100% compliance is achieved; once monthly for 3 months until 100% compliance is achieved.</p> <p>The Executive Director/Designee will perform environmental rounds to assess the cleanliness of the dining area daily for 3 weeks until 100% compliance is achieved; 3 times weekly for 3 weeks until 100% compliance is achieved; once monthly for 3 months until 100% compliance is achieved.</p>

Provider's Signature Tara Bica Title Executive Director Date 4/19/24



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	<p>Delaware Food Code 6-201.11 Floors, Walls, and Ceilings: Except as specified under § 6-201.14 and except for anti-slip floor coverings or applications that may be used for safety reasons, floors, floor coverings, walls, wall coverings, and ceilings shall be designed, constructed, and installed so they are SMOOTH and EASILY CLEANABLE.</p> <p>3/19/2024 – 11:05 AM - During the survey of the facility, the surveyor observed and physically touched a sticky substance on the front doors of the server refrigerator.</p>	<p>The Executive Director/Designee will perform a menu audit to ensure meals served match the menu daily for 3 weeks until 100% compliance is achieved; 3 times weekly for 3 weeks until 100% compliance is achieved; once monthly for 3 months until 100% compliance is achieved.</p> <p>The audit findings will be shared with the QA Committee.</p> <p>A. No residents were impacted by this deficient practice.</p> <p>B. All residents have the potential to be impacted by this deficient practice. No residents were harmed by this deficient practice.</p> <p>C. Root cause analysis revealed dining service tasks were not re-assigned once new dining associates joined the organization.</p> <p>D. The Director of Dining Services/designee will audit the refrigerator for uncovered food daily for 3 weeks until 100% compliance is achieved; 3 times weekly for 3 weeks until 100% compliance is achieved; once monthly for 3 months until 100% compliance is achieved.</p> <p>The audit findings will be shared with the QA Committee.</p>

Provider's Signature *[Signature]* Title *Executive Director* Date *6/19/24*

