

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 09/22/2021
NAME OF PROVIDER OR SUPPLIER WOODRIDGE VILLAGE		STREET ADDRESS, CITY, STATE, ZIP CODE 17650 GENERATIONS DR, SOUTH BEND, , 46635			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES...	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION...	(X5) COMPLETION DATE	
R 0000	INITIAL COMMENTS This visit was for the Investigation of Complaints IN00362673 and IN00362515. Complaint IN00362673 - Substantiated. No deficiencies related to the allegations are cited. Complaint IN00362515 - Substantiated. State deficiencies related to the allegations are cited at R0148. Unrelated deficiency is cited. Survey dates: September 20, 21 & 22, 2021 Facility number: 001148 Residential Census: 32 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality Review was completed on September 29, 2021.	R 0000			

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R 0148	Sanitation and Safety Standards - Deficiency 410 IAC 16.2-5-1.5(e)(1-4) (e) The facility shall maintain buildings, grounds, and equipment in a clean condition, in good repair, and free of hazards that may adversely affect the health and welfare of the residents or the public as follows: (1) Each facility shall establish and implement a written program for maintenance to ensure the continued upkeep of the facility. (2) The electrical system, including appliances, cords, switches, alternate power sources, fire alarm and detection systems, shall be maintained to guarantee safe functioning and compliance with state electrical codes. (3) All plumbing shall function properly and comply with state plumbing codes. (4) At least yearly, heating and ventilating systems shall be inspected. Based on observation, interview and record review, the facility failed to ensure a resident's room and a resident room used as a storage area was free of mildew/mold, for 2 of 2 rooms observed for physical environment. (Room 111 and Room 114)	R 0148	Resident was not put in this room upon return from rehabilitation facility. Area that was affected has been cleaned and disinfected with Danolyte to remove mold or mildew. Housekeeping will inspect rooms during daily cleaning to identify if areas are of concerns for mold or mildew and report to MD. Housekeeping has a weekly checklist form Housekeeping Weekly Checklist for Resident Apartments and updated for Unoccupied Residents Room the form states Observe for any damages or problems. Will add Observe for any damages, problems or mold and mildew added to form. Maintenance Director or designee and Administrator or designee will evaluate form weekly for concerns or issues.	10/15/2021
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Finding includes:

On 9/21/21 at 9:50 A.M., Room 111 was observed with the Maintenance Director. He indicated Resident C was moved from the room due to the air conditioning (AC) not functioning properly and a staff member had reported possible mold on the carpet. The discovery occurred when a housekeeping staff member was preparing for the resident's return, after a long stay at long term care facility. A black substance was observed in the coat closet, on the main wall. The black area measured 36 inches wide and 12 inches from baseboard up the wall in a scattered pattern. The two side walls had the same black substance, scattered throughout the wall. The area had a musty odor. The Maintenance Director call the blackened areas mold and indicated he had not had a chance to get in there and take care of the mold.

On 9/21/21 at 10:15 A.M., Room 114/storage room was observed with the Maintenance Director. The room had chairs stacked up, and boxes stacked up on one another. The bedroom closet was noted to have black mold/mildew covering all 3 walls, 1/2 way up the wall from baseboard, then scattered throughout the upper walls and ceiling. The depth of

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the growth was undetermined. The Maintenance Director indicated this room was used for storage area and no residents would be in this room. In the bathroom, the wall which had a toilet paper dispenser on it, in the corner, near the shower, had a black mold appearing substance and the dry wall was falling apart. The whole area smelled musty. He indicated a pipe in the bathroom had a leak and he had fixed it himself but that was probably where the moisture and/or damage started from and then possibly from the AC in the bedroom closet may have had leaked or had some condensation, but currently did not work.

On 9/21/21 at 11:28 A.M., an interview was conducted with the Regional Director of Operations (RDO) and the Admissions Coordinator. The RDO indicated he was aware of the blacken substance, on the walls, in both rooms. He indicated it was not mold, that black mold had a fuzzy texture to it, it was mildew. He further pointed out, he had not tested the areas to determine what type of mold was growing in those rooms. He indicated Resident C's room did not have the AC on after she left and she was gone for an extended time and the housekeeping staff had not completed their checks on the unoccupied room. The

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Admissions Coordinator indicated Resident C had left the facility on 7/24/21 and returned on 9/9/21 but never returned to her original room and was placed in a different room. This was due to a housekeeper who reported there was the mold in the room, prior to the residents return. The RDO indicated the storage/resident room had been used as a storage room for some time.

The United States Environmental Protection Agency @ www.epa.gov/mold, undated, indicated "...Mildew refers to certain kinds of mold or fungus. The term mildew is often used generically to refer to mold growth, usually with a flat growth habit...Molds can thrive on any organic matter, including clothing, leather, paper, ceilings, walls and floors of homes with moisture management problems.

During an interview, on 9/22/21 at 10:33 A.M., Resident C was in her room, 108. She indicated back in July she had a fall, in her room, and was taken to the hospital. From the hospital she went into a Nursing home for rehabilitation and returned to the facility earlier this month. She indicated she never returned to her old room due to her AC had broken while she was gone and there was mold in

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her old room. She had no idea when the AC had stopped working.

On 9/22/21 at 12:28 P.M., the RDO provided a form titled "Housekeeping Weekly Checklist for Resident Apartments", undated, and indicated this was the only policy/procedure regarding the cleaning of unoccupied resident rooms. The checklist indicated "...Unoccupied Rooms: *Run water in sinks, shower, tub *Clean and flush toilet *Dust and vacuum *Observe for any damage or problems...."

This State tag relates to complaint IN00362515.

Based on observation, interview and record review, the facility failed to ensure a resident's room and a resident room used as a storage area was free of mildew/mold, for 2 of 2 rooms observed for physical environment. (Room 111 and Room 114)

Finding includes:

On 9/21/21 at 9:50 A.M., Room 111 was observed with the Maintenance Director. He indicated Resident C was moved from the room due to the air conditioning (AC) not functioning properly and a staff member had reported possible mold on the carpet. The discovery occurred when a

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housekeeping staff member was preparing for the resident's return, after a long stay at long term care facility. A black substance was observed in the coat closet, on the main wall. The black area measured 36 inches wide and 12 inches from baseboard up the wall in a scattered pattern. The two side walls had the same black substance, scattered throughout the wall. The area had a musty odor. The Maintenance Director call the blackened areas mold and indicated he had not had a chance to get in there and take care of the mold.

On 9/21/21 at 10:15 A.M., Room 114/storage room was observed with the Maintenance Director. The room had chairs stacked up, and boxes stacked up on one another. The bedroom closet was noted to have black mold/mildew covering all 3 walls, 1/2 way up the wall from baseboard, then scattered throughout the upper walls and ceiling. The depth of the growth was undetermined. The Maintenance Director indicated this room was used for storage area and no residents would be in this room. In the bathroom, the wall which had a toilet paper dispenser on it, in the corner, near the shower, had a black mold appearing substance and the dry wall was falling apart. The whole area smelled musty. He indicated a

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pipe in the bathroom had a leak and he had fixed it himself but that was probably where the moisture and/or damage started from and then possibly from the AC in the bedroom closet may have had leaked or had some condensation, but currently did not work.

On 9/21/21 at 11:28 A.M., an interview was conducted with the Regional Director of Operations (RDO) and the Admissions Coordinator. The RDO indicated he was aware of the blacken substance, on the walls, in both rooms. He indicated it was not mold, that black mold had a fuzzy texture to it, it was mildew. He further pointed out, he had not tested the areas to determine what type of mold was growing in those rooms. He indicated Resident C's room did not have the AC on after she left and she was gone for an extended time and the housekeeping staff had not completed their checks on the unoccupied room. The Admissions Coordinator indicated Resident C had left the facility on 7/24/21 and returned on 9/9/21 but never returned to her original room and was placed in a different room. This was due to a housekeeper who reported there was the mold in the room, prior to the residents return. The RDO indicated the storage/resident room had been

used as a storage room for some time.

The United States Environmental Protection Agency @ www.epa.gov/mold, undated, indicated "...Mildew refers to certain kinds of mold or fungus. The term mildew is often used generically to refer to mold growth, usually with a flat growth habit...Molds can thrive on any organic matter, including clothing, leather, paper, ceilings, walls and floors of homes with moisture management problems.

During an interview, on 9/22/21 at 10:33 A.M., Resident C was in her room, 108. She indicated back in July she had a fall, in her room, and was taken to the hospital. From the hospital she went into a Nursing home for rehabilitation and returned to the facility earlier this month. She indicated she never returned to her old room due to her AC had broken while she was gone and there was mold in her old room. She had no idea when the AC had stopped working.

On 9/22/21 at 12:28 P.M., the RDO provided a form titled "Housekeeping Weekly Checklist for Resident Apartments", undated, and indicated this was the only policy/procedure regarding the cleaning of unoccupied resident

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	rooms. The checklist indicated "...Unoccupied Rooms: *Run water in sinks, shower, tub *Clean and flush toilet *Dust and vacuum *Observe for any damage or problems...." This State tag relates to complaint IN00362515.			
R 0273	Food and Nutritional Services - Deficiency 410 IAC 16.2-5-5.1(f) (f) All food preparation and serving areas (excluding areas in residents' units) are maintained in accordance with state and local sanitation and safe food handling standards, including 410 IAC 7-24. Based on observation, interviews and record reviews, the facility failed to maintain the facility's freezer at 0 (zero) or below per the facility's policy. This had the potential to effect all 32 residents in the facility. Finding includes: On 9/20/21 from 11:08 A.M. through 11:55 A.M., the following kitchen, walk-in, freezer concerns were observed with the Dietary Manager (DM): -the freezer temperature was observed to be 40 degrees, boxes containing meat, vegetables and bread, were wet and had moisture on them. The	R 0273	The Maintenance Director had Peltz Heating and Air Conditioning work on Freezer to get it running properly. We have been advised by repairmen that we need to purchase a 10,000 ten thousand dollar new door. We are making repairs as needed at this time and continue to have Peltz Heating and Air Conditioning make repairs as needed. Door is out of stock. We are researching our best options. Dietary will monitor temperatures 3x daily and log on temperature chart. Monitored by Dietary Manager, Administrator or designee daily until issue resolved. Research the purchase of a new 10,000 ten thousand dollar Freezer door as manufacture or material supply will allow due to material shortage from supply lines.	10/12/2021

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label, on the boxes, contained the following information: "Keep frozen 0 or below" The floor to the freezer was observed to have standing water.

- the freezer temperature log indicated the freezer's temperature was "17 degrees, on 9/20/21-AM and 21 degrees on 9/20/21-PM".

On 9/20/21 at 11:22 A.M., the Regional Director of Operations (RDO) observed the freezer and found the boxes of thawed meat and ice cream. He indicated everything would need to be thrown away today. He indicated he had been checking on the freezer but had no record of his observations of a freezers functioning at a zero or below temperature. The following thawed items were observed, with the RDO: diced chicken, sausage links, polish sausage, chicken breasts, hamburger patties, salmon patties, cod, shrimp, bread, three ice cream buckets (3 gallons of ice cream each) and various vegetables.

A form titled, "Refrigerator & Freezer Temperature Log", dated September 2021, indicated on 9/4/21 was the last day the temperature was record as 0 (zero). The temperatures recorded ranged from 5 to 22 degrees. The bottom of the form indicated "...If temps [temperatures] do not meet

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standard, please notify Dining Services Director...." The top of the form stated ..."Freezer Temp: 0" or below...."

During an interview, on 9/20/21 at The DM indicated the persons signing the log worker yesterday, so the temperature hadn't been checked today. The DM indicated she had spoken with the Maintenance Director about the freezer not working properly and there was a "big glob" of ice on the floor, which he removed earlier this morning

During an interview, on 9/20/21 at 11:30 A.M., the Maintenance Director indicated he had been in the freezer earlier today to remove some ice build up on the floor and he did notice the ice on the floor was kind of slushy, as if it was melting.

During an interview, on 9/20/21 at 2:15 PM the Maintenance Director indicated no one had notified him that the freezer was not maintaining a temperature of 0 (zero) or below, even though the log sheet indicated to contact him if freezer wasn't maintaining the correct temperature to keep foods frozen.

On 9/20/21 at 1:57 P.M., the Admissions/Marketing Director provided a policy titled, "Food and Nutrition Services", dated December 2009, 2015 and

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FORM APPROVED

OMB NO. 0938-0391

indicated the policy was the one currently used by the facility. The policy indicated "...[Name of facility] shall store, prepare, distribute, and serve food under sanitary conditions...9. Each refrigerator and freezer shall be provided with an indicating thermometer accurate to plus or minus 3 degrees F., located in the warmest section of the refrigeration facility and must be of such type and so situated that the thermometer can be easily read. Thermostats shall not be relied upon to maintain temperatures at correct levels in the absence of thermometers. The temperature of the refrigerator shall be 41* Fahrenheit or below. Freezer temperatures shall be maintained at 0 degrees Fahrenheit...."

Based on observation, interviews and record reviews, the facility failed to maintain the facility's freezer at 0 (zero) or below per the facility's policy. This had the potential to effect all 32 residents in the facility.

Finding includes:

On 9/20/21 from 11:08 A.M. through 11:55 A.M., the following kitchen, walk-in, freezer concerns were observed with the Dietary Manager (DM):

-the freezer temperature was observed to be 40 degrees,

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boxes containing meat, vegetables and bread, were wet and had moisture on them. The label, on the boxes, contained the following information: "Keep frozen 0 or below" The floor to the freezer was observed to have standing water.

- the freezer temperature log indicated the freezer's temperature was "17 degrees, on 9/20/21-AM and 21 degrees on 9/20/21-PM".

On 9/20/21 at 11:22 A.M., the Regional Director of Operations (RDO) observed the freezer and found the boxes of thawed meat and ice cream. He indicated everything would need to be thrown away today. He indicated he had been checking on the freezer but had no record of his observations of a freezers functioning at a zero or below temperature. The following thawed items were observed, with the RDO: diced chicken, sausage links, polish sausage, chicken breasts, hamburger patties, salmon patties, cod, shrimp, bread, three ice cream buckets (3 gallons of ice cream each) and various vegetables.

A form titled, "Refrigerator & Freezer Temperature Log", dated September 2021, indicated on 9/4/21 was the last day the temperature was record as 0 (zero). The temperatures recorded ranged from 5 to 22

degrees. The bottom of the form indicated "...If temps [temperatures] do not meet standard, please notify Dining Services Director...." The top of the form stated ..."Freezer Temp: 0" or below...."

During an interview, on 9/20/21 at The DM indicated the persons signing the log worker yesterday, so the temperature hadn't been checked today. The DM indicated she had spoken with the Maintenance Director about the freezer not working properly and there was a "big glob" of ice on the floor, which he removed earlier this morning

During an interview, on 9/20/21 at 11:30 A.M., the Maintenance Director indicated he had been in the freezer earlier today to remove some ice build up on the floor and he did notice the ice on the floor was kind of slushy, as if it was melting.

During an interview, on 9/20/21 at 2:15 PM the Maintenance Director indicated no one had notified him that the freezer was not maintaining a temperature of 0 (zero) or below, even though the log sheet indicated to contact him if freezer wasn't maintaining the correct temperature to keep foods frozen.

On 9/20/21 at 1:57 P.M., the Admissions/Marketing Director

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Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting provided it is determined that other safeguards provide sufficient protection to the patients. (See instructions.)

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

TITLE

(X6) DATE