

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 09/30/2025
NAME OF PROVIDER OR SUPPLIER WOODLAND TERRACE OF CARMEL		STREET ADDRESS, CITY, STATE, ZIP CODE 689 PRO MED LANE, CARMEL, , 46032			
(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 a State Residential Licensure Survey. Survey dates: September 29 and 30, 2025 Facility number: 013510 Residential Census: 97 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review was completed on October 2, 2025.	R 0000			
R 0274	Food and Nutritional Services - Noncompliance 410 IAC 16.2-5-5.1(g)(1-3) (g) There shall be an organized food service department directed by a supervisor competent in food service management and knowledgeable in sanitation standards, food handling, food preparation, and meal service. (1) The supervisor must be one (1)	R 0274	Community educated all culinary staff on 9/30/25 proper dish machine final rinse temperatures. Community had outside vendor investigate the dish machine on 10/1/25. Outside vendor corrected the	10/15/2025	

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FORM APPROVED

OMB NO. 0938-0391

of the following:

(A) A dietitian.

(B) A graduate or student enrolled in and within one (1) year from completing a division approved, minimum ninety (90) hour classroom instruction course that provides classroom instruction in food service supervision who has a minimum of one (1) year of experience in some aspect of institutional food service management.

(C) A graduate of a dietetic technician program approved by the American Dietetic Association.

(D) A graduate of an accredited college or university or within one (1) year of graduating from an accredited college or university with a degree in foods and nutrition or food administration with a minimum of one (1) year of experience in some aspect of food service management.

(E) An individual with training and experience in food service supervision and management.

(2) If the supervisor is not a dietitian, a dietitian shall provide consultant services on the premises at peak periods of operation on a regularly scheduled basis.

(3) Food service staff shall be on duty to ensure proper food preparation, serving, and sanitation.

Based on observation, interview

temperature settings of the final rinse stage of washing on 10/14/25.

Community has installed final rinse chemical dispenser on 10/15/25, in the event that the machine does not hold temp again. The chemical will sanitize the dishes properly.

Community manager will monitor and initial the temperature log daily for 90 days ending 1/15/26 to ensure compliance.

No residents were affected by the deficient practice.

and record review, the facility failed to ensure staff were knowledgeable on safe dishwasher temperatures and to ensure the high temperature dishwashing machine reached an appropriate final rinse temperature for 1 of 1 dishwasher reviewed in the kitchen. This deficient practice had the potential to affect 97 of 97 residents who received food from the facility.

Findings include:

During a continuous observation, on 9/29/25 at 11:00 a.m., the high temperature dishwasher was running. The final rinse cycle was not reaching 180 degrees before the 6th time the dishes ran through it. The final rinse had reached 167 degrees on the 6th attempt.

There were several racks of dishes drying which had already been used and ran through the dishwasher.

During an interview, on 9/29/25 at 11:10 a.m., Culinary Services Director 2 indicated he thought the dishwasher was supposed to reach 160 degrees for the final rinse. English was not the native language of the dishwashers who normally ran the dishwasher. They would not know the proper temperature the dishwasher was supposed

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to reach.

During an interview, on 9/29/25 at 11:10 a.m., Culinary Services Director 2 indicated the dishwasher was supposed to hit 180 degrees for the final rinse every time dishes were run through it. The dishes on the drying racks were finished washing.

During an interview, on 9/29/25 at 11:19 a.m., Server 4 indicated she did not know what the final rinse temperature was supposed to be.

During an interview, on 9/29/25 at 11:20 a.m., Server 3 indicated she did not know what the final rinse temperature was supposed to be.

During an interview, on 9/29/25 at 11:26 a.m., the Executive Director (ED) indicated the final rinse cycle for the dishwasher was supposed to reach 180 degrees.

During an interview, on 9/30/25 at 10:45 a.m., the ED indicated the dishwasher had trouble reaching the final rinse temperature.

A September dish machine log had the following temperatures recorded:

On 9/1/25, the a.m. surface temperature was 160 degrees, and the p.m. surface

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temperature was 154.

On 9/6/25, the a.m. surface temperature was 170 degrees, and the p.m. surface temperature was 168.

On 9/8/25, the a.m. surface temperature was 169 degrees, and the p.m. surface temperature was 174.

On 9/9/25, the a.m. surface temperature was 174 degrees, and the p.m. surface temperature was 175.

On 9/10/25, the a.m. surface temperature was 165 degrees.

On 9/15/25, the a.m. surface temperature was 146 degrees.

On 9/28/25, the a.m. surface temperature was 165 degrees, and the p.m. surface temperature was 169.

A current facility policy, untitled, and received from the ED on 9/30/25 at 11:53 a.m., indicated "...The temperature of the wash solution in spray type warewashing machines that use hot water to sanitize may not be less than...Hot Water Machine Type...Sanitization Temperature of the machine...180 degrees Fahrenheit...."

Based on observation, interview and record review, the facility failed to ensure staff were knowledgeable on safe

dishwasher temperatures and to ensure the high temperature dishwashing machine reached an appropriate final rinse temperature for 1 of 1 dishwasher reviewed in the kitchen. This deficient practice had the potential to affect 97 of 97 residents who received food from the facility.

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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 Nicholas Halstead

TITLE Executive Director

(X6) DATE 10/16/2025