

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 03/18/2026
NAME OF PROVIDER OR SUPPLIER TRADITIONS AT NORTH WILLOW		STREET ADDRESS, CITY, STATE, ZIP CODE 1703 W 86TH STREET, INDIANAPOLIS, , 46260			
(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. This visit included the Investigation of Intakes 466835 and 468377. Intake 466835 - No deficiencies related to the allegations are cited. Intake 468377 - No deficiencies related to the allegations are cited. Survey dates: March 17 and 18, 2026. Facility number: 013880 Residential Census: 146 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review completed on March 27, 2026	R 0000			

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

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 observations and interviews, the facility failed to ensure proper open dates and expiration dates were written on open items in dry storage and on leftover food from a previous meal in the walk-in refrigerator. This deficient practice had the potential to affect 160 of 160 residents who received food from the kitchen. Findings include: On 3/17/26 at 9:50 a.m. the facility kitchen was reviewed with the Dietary Director. The findings were as follows: In dry storage there was an open package of pancake mix that had no open date on it. The Dietary Director indicated they normally used the entire package of mix so someone must have forgotten to put a date on it. In dry storage there were two open bags of dry pasta that had an expiration date of 3/5/26	R 0273		04/16/2026
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DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

written on them. The Dietary director indicated he thought the pasta had a longer shelf life, but he wasn't sure, so he threw the pasta out to be safe.

In dry storage there was a clear plastic container with a dark brown powder in it that had an expiration date of 12/5/24 written on it. The Dietary Director indicated the powder was coco powder and that they must not have replaced the label when putting new bags of coco powder in the container. He indicated he would throw out what was left in the container and fix the label.

In the walk-in refrigerator there was a tray with premade lunch meat sandwiches on it that did not have a date it was prepared or the date it expired on it. The Dietary Director indicated it was from the previous day, but since it did not have a date on it to be sure he would throw the sandwiches out.

On 3/18/26 at 11:38 a.m. a copy of a current facility policy titled, "Standards and guidelines: SG Food Labeling and Dating," dated 10/13/17, was provided. That policy indicated " ...Foods are labeled and dated for identification purposes and to ensure they are discarded within acceptable time frames ... 2. Leftover foods and all opened,

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

	perishable items are discarded after 72 hours or dated with the used by date. This may include the date by which it should be sold, eaten, or thrown out"			
R 0301	Pharmaceutical Services - Deficiency 410 IAC 16.2-5-6(c)(5) (5) Labeling of prescription drugs shall include the following: (A) Resident ' s full name. (B) Physician ' s name. (C) Prescription number. (D) Name and strength of the drug. (E) Directions for use. (F) Date of issue and expiration date (when applicable). (G) Name and address of the pharmacy that filled the prescription. If medication is packaged in a unit dose, reasonable variations that comply with the acceptable pharmaceutical procedures are permitted. Based on observation and interview, the facility failed to indicate a date opened on bottles of lorazepam (an antianxiety medication) for 1 of 1 medication room observed (Memory Care) (Residents 11,	R 0301		04/16/2026

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

FORM APPROVED

OMB NO. 0938-0391

13, and 14).

Findings include:

On 3/17/26 at 12:04 p.m., the refrigerator on Memory Care was observed. Inside a locked box were bottles of lorazepam. The bottles were checked for dates and the dates were not present.

1. Resident 11 had a bottle of lorazepam in the refrigerator without a date to indicate when it was opened.

2. Resident 13 had a bottle of lorazepam in the refrigerator without a date to indicate when it was opened.

3. Resident 14 had a bottle of lorazepam in the refrigerator without a date to indicate when it was opened.

On 3/17/26 at 12:15 p.m., LPN 5 indicated the bottles were lacking a date opened on the bottles of lorazepam.

A policy was not provided for medication storage at the time of exit.

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