

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 05/10/2024	
NAME OF PROVIDER OR SUPPLIER HERITAGE WOODS OF NOBLESVILLE		STREET ADDRESS, CITY, STATE, ZIP CODE 9600 E 146TH STREET, NOBLESVILLE, , 46060					
(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: May 8, 9 & 10, 2024 Facility number: 014213 Residential Census: 120 This State Residential Finding is cited in accordance with 410 IAC 16.2-5. Quality review completed May 16, 2024.	R 0000					
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,	R 0273	The corrective action that will be accomplished for those residents found to have been affected by the alleged deficient practice: No residents were affected. No adverse occurrences noted. The food items were immediately discarded. How the facility will identify			06/07/2024	

interview, and record review, the facility failed to ensure sanitation and safe food handling practices were maintained.

Findings include:

During an initial tour of the kitchen on 5/8/24 at 10:07 a.m., a large metal pan of frozen soup was observed in the freezer, uncovered, without a date, or label. A bowl of chopped salad greens was in the refrigerator next to the cook station uncovered, without a date or label.

During an interview, at the time of the observation, the Dietary Manager indicated the soup and salad greens should be covered and be dated.

A current facility policy, undated, titled, "Refrigerated Storage Policy," provided by the Corporate Nurse on 5/8/24 at 11:20 a.m., included the following: "...Policy: It is this community's policy to store and cool down food properly. a) Potentially hazardous food requiring refrigeration after preparation shall be labeled or tagged with the date, time, discard date, initials of the person who made it...."

Based on observation, interview, and record review, the facility failed to ensure sanitation and safe food

other residents having the potential to be affected by the alleged deficient practice and the corrective

action that will be taken: All AL and AL memory care residents who consume food prepared by the community have the potential to be affected by the alleged deficient practice.

The measures put in place and systemic changes the facility will make to ensure that the alleged deficient practice does not

recur: Dietary Manager or designee will provide education covering the topics of sanitation and safe food handling practices and the "Refrigerated Storage Policy" for all dietary staff on 5/8/2024. Dietary Manager or designee will provide education to all staff upon hire and annually thereafter.

The corrective action will be monitored to ensure the alleged deficient practice will not recur:

As a measure of ongoing compliance, the monthly QA committee will review the Dietary Manager or designee audit of freezer and refrigerator for items that are

handling practices were maintained.

Findings include:

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stored and tagged properly daily for 4 weeks, 2x a week for 4 weeks, then monthly for 4 months.

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