STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING B. WING	02/20/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CEDARHURST OF DYER	1763 CALUMET AVENUE, DYER, , 46311

(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 Complaint IN00445933. Complaint IN00445933 - State deficiency related to the allegations is cited at R273. Survey date: February 20, 2025 Facility number: 014415 Residential Census: 69 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review completed on 2/24/25.	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	R 0273	**R273** **Food and Nutritional Services:** **What corrective**	03/20/2025

	standards, including 410 IAC 7-24. Based on observation and interview, the facility failed to store, serve, and prepare food under sanitary conditions related to dirty food equipment, food crumbs on the floor and under appliances, undated food in the refrigerator and freezer, food splatter on ceiling tiles, food and grease build up on the stove top and fryer, dirty appliances, and meat not stored appropriately for 1 of 1 kitchen observed. (The Main Kitchen) This had the potential to affect 69 out of 69 total residents who received food from the kitchen. Findings include: During the kitchen sanitation tour on 2/20/25 at 9:20 a.m. with the Dietary Service Director (DSD), the following was observed: a. There were three ice cream bars stored in the freezer in an open sleeve not dated. During an interview at the time, the DSD indicated the ice cream was still good, but was not dated. b. There was Salisbury steak removed from the packing and stored on the highest top shelf in the freezer. The saran wrap was falling off and the pan was not completely covered,		**action(s) will be accomplished for those residents found to have been affected by the deficient practice;** All kitchen appliances, countertops, ceiling tiles, and floors were thoroughly cleaned and restored to sanitary conditions. **How the facility will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken;** All residents have the potential to be affected by the same deficient practice. **What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur;**	

	exposing the Salisbury steaks. During an interview at the time, the DSD indicated "yeah, that needs to be rewrapped". c. The refrigerator had a box of lunch meat and three lettuce bags not dated. During an interview at the time, the DSD indicated he had just received an order and the lettuce was new and not yet dated. The box of lunch meat not labeled appropriately. d. The was an accumulation of food and grease on the inside panel of the fryer. e. There was an accumulation of food and grease on all six oven burners. f. The floor had crumb accumulation under the stoves and fryer, and throughout kitchen. g. There was food splatter on the ceiling tiles by the toaster. h. The front of the fryer and stove were dirty with dried spillage.		All dining staff were in-serviced on cleaning/sanitizing workstations and kitchen equipment, cleaning checklists, as well as cleaning schedules to be utilized effective immediately and ongoing. All dining staff were in-serviced on proper storage of meat. All dining staff were in-serviced on proper procedures for dating and storing food. **How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place; and** DSD/designee will monitor cleaning checklists weekly for 6 weeks to ensure all daily and monthly cleaning tasks are complete.	

During an interview on 2/20/25 at 10:00 a.m., the Administrator and Director of Nursing (DON) indicated they understood the kitchen concerns and had no additional information to provide.

This state residential finding relates to Complaint IN00445933.

Based on observation and interview, the facility failed to store, serve, and prepare food under sanitary conditions related to dirty food equipment, food crumbs on the floor and under appliances, undated food in the refrigerator and freezer, food splatter on ceiling tiles, food and grease build up on the stove top and fryer, dirty appliances, and meat not stored appropriately for 1 of 1 kitchen observed. (The Main Kitchen) This had the potential to affect 69 out of 69 total residents who received food from the kitchen.

Findings include:

During the kitchen sanitation tour on 2/20/25 at 9:20 a.m. with the Dietary Service Director (DSD), the following was observed:

a. There were three ice cream bars stored in the freezer in an open sleeve not dated.

During an interview at the time, the DSD indicated the ice cream

DSD/designee will inspect all refrigerators
and freezers weekly for 6 weeks to ensure all foods are properly dated and
stored.

By what date the systemic changes will be completed.

March 20, 2025

was still good, but was not dated.

b. There was Salisbury steak removed from the packing and stored on the highest top shelf in the freezer. The saran wrap was falling off and the pan was not completely covered, exposing the Salisbury steaks.

During an interview at the time, the DSD indicated "yeah, that needs to be rewrapped".

c. The refrigerator had a box of lunch meat and three lettuce bags not dated.

During an interview at the time, the DSD indicated he had just received an order and the lettuce was new and not yet dated. The box of lunch meat not labeled appropriately.

d. The was an accumulation of food and grease on the inside panel of the fryer.

e. There was an accumulation of food and grease on all six oven burners.

f. The floor had crumb accumulation under the stoves and fryer, and throughout kitchen.

g. There was food splatter on the ceiling tiles by the toaster.

h. The front of the fryer and stove were dirty with dried

	spillage. During an interview on 2/20/25 at 10:00 a.m., the Administrator and Director of Nursing (DON) indicated they understood the kitchen concerns and had no additional information to provide. This state residential finding relates to Complaint IN00445933.			

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