

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 07/18/2025	
NAME OF PROVIDER OR SUPPLIER COMMONS AT HONEY CREEK, THE		STREET ADDRESS, CITY, STATE, ZIP CODE 1450 EAST CROSSING BOULEVARD, TERRE HAUTE, , 47802					
(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: July 17 & 18, 2025 Facility number: 015282 Residential Census: 67 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review was completed on July 22, 2025.	R 0000	This plan of correction constitutes the written allegation of compliance for the deficiencies cited. However, submission of this Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. The Plan of Correction is submitted to meet requirements established by state and federal law. The Commons at Honey Creek requests that this Plan of Correction be considered an Allegation of Compliance. Compliance is effective July 18, 2025.				
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.	R 0273	This plan of correction constitutes the written allegation of compliance for the deficiencies cited. However, submission of this Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. The Plan of Correction is submitted to meet requirements established by			07/18/2025	

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CENTERS FOR MEDICARE & MEDICAID SERVICES

FORM APPROVED

OMB NO. 0938-0391

Based on observation, interview, and record review, the facility failed to ensure food items were used or disposed of by the use-by-date and open dates were written on salad dressings, for 1 of 2 kitchen observations.

Findings include:

During the initial kitchen tour with the Culinary Manager, on 7/17/25 at 9:38 a.m., the following was observed:

1. Two metal containers covered with aluminum foil, one with yogurt and the other with berries, were observed with tags that indicated use by dates of 7/14.

2. A large plastic jar of poppy seed salad dressing and large plastic jar of ranch dressing lacked open dates. Dates written on both lids of the dressings indicated 11/5 to 12/5.

During an interview, on 7/17/25 at 9:50 a.m., the Culinary Manager indicated he believed the metal containers with the yogurt and the berries had both just been placed into the metal containers recently. He was not sure why the dates on the containers had not been updated when they were filled. The salad dressings were good for 6 months from the dates they were opened. He was unsure

state and federal law. The Commons at Honey Creek requests that this Plan of Correction be considered an Allegation of Compliance. Compliance is effective July 18, 2025.

R273 – It is the policy of The Commons at Honey Creek that 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.

1
What corrective action will be accomplished for those residents found to be affected by the deficient practice?

a
No Residents were affected

2
How will the facility identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?

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

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why the containers had not been dated when they were opened.

3. A metal container with whole cucumbers was observed. The container had a tag which indicated a use by date of 7/14.

During an interview, on 7/17/25 at 10:05 a.m., the Culinary Manager indicated he was unsure how long the cucumbers had been in the refrigerator. He was training new staff, and they had either not paid any attention to the use-by-date or had not updated the use-by-date when they placed the cucumbers in the container. The policy was that leftover foods could only be kept for 4 days after initial use and should be discarded at that time. All of the open dates and/or use by dates should have included the year as well.

On 7/17/25 at 1:20 p.m., the Executive Director (ED) provided a document, with a revised date of 5/25, titled, "Food Storage," and indicated it was the policy currently being used by the facility. The policy indicated, "...Procedure...7...The food must clearly be labeled with the name of the product, the date it was prepared, and marked to indicate the date by which the food shall be consumed or discarded. Leftover foods can be held at 41 degrees Fahrenheit (F) or less

a

No residents identified

3

What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not re-occur?

a

The policy addressing the deficient practice has been provided as education to all culinary staff. The culinary manager will post and review policy periodically and with all new employees.

4

How the corrective action will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place?

a

Administrator or designee will complete the Food Storage Quality Assurance Tool

5

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

for no more than 3 days...9. Food items that are not considered potentially hazardous including commercially prepared...salad dressing...will be labeled when opened and...used or disposed of within 90 days of opening or per the use-by-date, whichever comes first...."

Based on observation, interview, and record review, the facility failed to ensure food items were used or disposed of by the use-by-date and open dates were written on salad dressings, for 1 of 2 kitchen observations.

Findings include:

During the initial kitchen tour with the Culinary Manager, on 7/17/25 at 9:38 a.m., the following was observed:

1. Two metal containers covered with aluminum foil, one with yogurt and the other with berries, were observed with tags that indicated use by dates of 7/14.

2. A large plastic jar of poppy seed salad dressing and large plastic jar of ranch dressing lacked open dates. Dates written on both lids of the dressings indicated 11/5 to 12/5.

During an interview, on 7/17/25 at 9:50 a.m., the Culinary

By what date the systemic changes will be completed

a
8/18/25

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

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Manager indicated he believed the metal containers with the yogurt and the berries had both just been placed into the metal containers recently. He was not sure why the dates on the containers had not been updated when they were filled. The salad dressings were good for 6 months from the dates they were opened. He was unsure why the containers had not been dated when they were opened.

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CENTERS FOR MEDICARE & MEDICAID SERVICES

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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
SIGNATUREErin Brown

TITLEExecutive Director

(X6) DATE08/01/2025