

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

PRINTED: 05/05/2025
FORM APPROVED
OMB NO. 0938-039

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|--|---|---|---------------------|---|--|--|--|
| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER | | X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____ | | X3) DATE SURVEY COMPLETED 04/16/2025 | |
| NAME OF PROVIDER OR SUPPLIER ALLISONVILLE MEADOWS ASSISTED LIVING | | | | STREET ADDRESS, CITY, STATE, ZIP COD 10410 ALLISONVILLE ROAD FISHERS, IN 46038 | | | |
| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCY (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | | (X5) COMPLETION DATE | |
| R 0000 Bldg. 00 | <p>This visit was for a State Residential Licensure Survey.</p> <p>Survey dates: April 15 and 16, 2025</p> <p>Facility number: 013039</p> <p>Residential Census: 115</p> <p>This State Residential Finding is cited in accordance with 410 IAC 16.2-5.</p> <p>Quality review completed on April 21, 2025.</p> | | R 0000 | | | | |
| R 0273 Bldg. 00 | <p>410 IAC 16.2-5-5.1(f) Food and Nutritional Services - Deficiency</p> <p>Based on observation, interview, and record review, the facility failed to ensure expired food was disposed of timely and failed to store food properly with the potential to affect 115 of 115 residents at the facility.</p> <p>Findings include:</p> <p>On 4/15/25 at 10:10 a.m., the facility kitchen was observed with Regional Culinary Manager 2 (RCM 2). The dry storage contained the following items listed below:</p> <p>Six packages of 10" burrito shells that expired on 4/10/25 and Twelve single serving cups of diced peaches in 100% fruit juice that expired on 3/19/25.</p> <p>The walk-in refrigerator was observed to have the following items listed below:</p> | | R 0273 | <p>What corrective action(s) will be accomplished for those residents who found to have been affected by the deficient practice?</p> <p>1 On 4/15/25, RCM2 immediately disposed of expired foods. All foods in the walk-in cooler, and pantry were reviewed and corrected so all items were appropriately covered or wrapped, labeled and dated.</p> <p>How will you identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?</p> <p>1 All residents have the potential to be affected. No</p> | | 05/06/2025 | |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Kaitlin Buenavides

Executive Director

05/01/2025

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosed days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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| | <p>One bottle of kitchen bouquet, open date 1/10/25, and use by date of 4/9/25, One five-gallon bucket of pickles with no open or use by date on the container. The lid was loose causing the pickles to be open to air, Four red bell peppers with a use by date of 4/14/25, Two unopened bags of shredded cabbage with a manufacturer expiration date of 4/8/25, Two pitchers of apple juice with a use by date of 4/14/25, and One pitcher of tomato juice with a use by date of 4/14/25.</p> <p>During an interview on 4/15/25 at 10:45 a.m., RCM 2 indicated the food items should have been disposed of, the pickle lid should have been closed tightly and an open and use by date should have been on the bucket containing pickles.</p> <p>A policy titled "Food Storage" was received, on 4/15/25 at 11:25 a.m., from the Executive Director. The policy indicated "Policy Sufficient storage facilities are provided to keep food safe, wholesome, and appetizing. Food is stored at an appropriate temperature and by methods designed to prevent contamination ... 8. Refrigerated, ready-to-eat, potentially hazardous food purchased from approved vendors shall be clearly marked with the date the original container is opened and the date by which the food shall be consumed or discarded. This opened food can be held at 41F or less for no more than 7 days and the date marked may not exceed the manufacturer's use-by-date. The day the original container is opened shall be counted as Day 1... 11. Refrigeration ... f. All foods shall be covered or wrapped tightly, labeled, and dated following the</p> | | | | <p>residents were adversely affected. Culinary staff were re-educated by 4/17/2025, including, but not limited to, food storage, and dates.</p> <p>What measures will be put into place or systemic changes will you make to ensure that the deficient practice does not reoccur?</p> <p>1 Culinary staff were re-educated by 4/17/2025 including, but not limited to, food storage, and dates. A review of the kitchen by Culinary Manager/Executive Director to ensure compliance and re-education of culinary staff on food storage policy and dates by 5/06/2025.</p> <p>How the corrective action(s) will be monitored to ensure the deficient practice will not reoccur, i.e., what quality assurance program will be put into place?</p> <p>1 food storage monitoring tool will be completed 3 times weekly x 4 weeks, then once weekly x 8 weeks. If a 100% threshold is not met, then disciplinary action and new action plan will be completed. Monitoring tools will be completed by the Culinary Manager or Executive Director/designee.</p> | | |

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| | labeling guidelines" | | | | | | |