

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

PRINTED: 03/12/2025
FORM APPROVED
OMB NO. 0938-039

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 02/20/2025	
NAME OF PROVIDER OR SUPPLIER CEDARHURST OF DYER				STREET ADDRESS, CITY, STATE, ZIP COD 1763 CALUMET AVENUE DYER, IN 46311			
(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 the Investigation of Complaint IN00445933.</p> <p>Complaint IN00445933 - State deficiency related to the allegations is cited at R273.</p> <p>Survey date: February 20, 2025</p> <p>Facility number: 014415</p> <p>Residential Census: 69</p> <p>These State Residential Findings are cited in accordance with 410 IAC 16.2-5.</p> <p>Quality review completed on 2/24/25.</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 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.</p> <p>Findings include:</p> <p>During the kitchen sanitation tour on 2/20/25 at 9:20 a.m. with the Dietary Service Director (DSD), the following was observed:</p>		R 0273	<p>R273 Food and Nutritional Services: What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice;</p> <p>All kitchen appliances, countertops, ceiling tiles, and floors were thoroughly cleaned and restored to sanitary conditions.</p> <p>How the facility will identify other residents having the potential to be affected by the same deficient practice and</p>		03/20/2025	

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

TITLE

(X6) DATE

Tiffany Anderson

Executive Director

02/27/2025

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>a. There were three ice cream bars stored in the freezer in an open sleeve not dated.</p> <p>During an interview at the time, the DSD indicated the ice cream was still good, but was not dated.</p> <p>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.</p> <p>During an interview at the time, the DSD indicated "yeah, that needs to be rewrapped".</p> <p>c. The refrigerator had a box of lunch meat and three lettuce bags not dated.</p> <p>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.</p> <p>d. There was an accumulation of food and grease on the inside panel of the fryer.</p> <p>e. There was an accumulation of food and grease on all six oven burners.</p> <p>f. The floor had crumb accumulation under the stoves and fryer, and throughout kitchen.</p> <p>g. There was food splatter on the ceiling tiles by the toaster.</p> <p>h. The front of the fryer and stove were dirty with dried spillage.</p> <p>During an interview on 2/20/25 at 10:00 a.m., the</p>				<p>what corrective action will be taken;</p> <p>All residents have the potential to be affected by the same deficient practice.</p> <p>What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur;</p> <p>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.</p> <p>All dining staff were in-serviced on proper storage of meat.</p> <p>All dining staff were in-serviced on proper procedures for dating and storing food.</p> <p>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</p> <p>DSD/designee will monitor cleaning checklists weekly for 6 weeks to ensure all daily and monthly cleaning tasks are complete.</p>		

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	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.				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		