

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 08/09/2024
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NAME OF PROVIDER OR SUPPLIER TOWNE PARK ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP COD 503 S MURPHY AVE BRAZIL, IN 47834
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIE (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 Complaints IN00438944 and IN00439597.</p> <p>Complaint IN00438944 - State deficiencies related to the allegations are cited at R0273.</p> <p>Complaint IN00439597 - No deficiencies related to the allegations are cited.</p> <p>Survey date: August 9, 2024</p> <p>Facility number: 014623</p> <p>Residential Census: 35</p> <p>These State Residential Findings are cited in accordance with 410 IAC 16.2-5.</p> <p>Quality review completed on August 15, 2024.</p>	R 0000	<p>This Plan of Correction is being prepared and executed because it is required by the provisions of state regulation, and not because Towne Park Assisted Living agrees with the allegations and citations listed on the statement of deficiencies. Towne Park Assisted Living maintains that the alleged deficiencies do not individually or collectively jeopardize the health and safety of the residents, nor are they of such character as to limit our capacity to render adequate care as prescribed by regulation. This plan of correction shall operate as Towne Park's written credible allegations of compliance. This plan of correction is not meant to establish any standard of care contract, obligation or position, and Towne Park reserves all possible contentions and defenses in any civil or criminal actions or proceeding.</p> <p>We respectfully request paper compliance.</p>	
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 staff disposed of expired food and failed to ensure proper labeling of food in the walk-in refrigerator for 1 of</p>	R 0273	<p>R 273 Food and Nutritional Services</p> <ul style="list-style-type: none"> What corrective action(s) will be accomplished for those residents 	08/29/2024

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Hannah Wilson	Administrator	08/28/2024

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>1 kitchen observations. This had the potential to affect 36 of 36 resident who received food prepared from the kitchen.</p> <p>Finding includes:</p> <p>On 8/9/22 at 9:15 a.m., during a tour of the walk-in refrigerator with Cook 10, two packages of turkey breast slices were observed. The turkey breast slices were received by the kitchen on June 12, 2024, and had an expiration date of July 19, 2024. Cook 10 indicated she was not aware of the turkey being expired and they just received a new shipment on Wednesday, August 7, 2024. In the walk-in refrigerator was a secondary plastic container of beets and one of olives and they did not contain an open date. There was a silver bowl of prepared chocolate pudding and did not contain a date of when it was prepared. Cook 10 indicated the pudding was prepared last night by evening shift.</p> <p>During an interview, on 8/9/24 at 9:20 a.m., Cook 10 indicated expired food should be discarded. When food was placed in secondary plastic containers, they should have an open date placed on them. Prepared food should have a date placed on them when stored, so staff knew how long it the food was good for.</p> <p>During an interview, on 8/9/24 at 9:25 a.m., Dietary Manager indicated prepared food was good for 4 days and then should be discarded. The Dietary Manager indicated they have had a changeover of staff recently and she was still educating staff on making sure they were placing open dates on food when prepared or placed in new containers.</p> <p>During an interview, on 8/9/24 at 10:18 a.m., Resident B indicated the food was not always</p>		<p>found to have been affected by the deficient practice;</p> <p>The kitchen was immediately audited for food expiration dates and ensured that all food was labeled with dates.</p> <ul style="list-style-type: none"> • 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. None were identified. • What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur; Dietary staff were re-educated in the Food Safety and Sanitation policy and procedures. • 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 The Dietary Manager or designee will audit food expiration dates and food labeling daily for 30 days, weekly for 4 weeks and then monthly for three months to ensure deficient practice does not recur. • By what date the systemic changes will be completed. August 29th, 2024 	

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

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	<p>good, but she had not noticed anything tasting spoiled or old.</p> <p>During an interview, on 8/9/24 at 10:22 a.m., Resident C indicated the food was not always prepared well, but she had not noticed anything tasting spoiled or old.</p> <p>On 8/9/24 at 10:09 a.m., the Administrator provided a document, dated 8/14/19, titled, "Food Safety and Sanitation," and indicated it was the policy currently being used by the facility. The policy indicated, " ...All leftovers are labeled, covered, and dated when stored. They are used within 72 hours (or discarded). Foods with expiration dates are used prior to the date on the package"</p> <p>This citation relates to Complaint IN00438944.</p>				