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

FORM APPROVED
OMB NO. 0938-039

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | | A. BUILDING 00<br>B. WING | 01/19/2023 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP COD |
|---|---|
| FIVE STAR RESIDENCES OF NORTHWOODS | 2501 FRIENDSHIP BLVD<br>KOKOMO, IN 46901 |

| (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<br><br>Bldg. 00 | This visit was for the Investigation of Complaints IN00389996, IN00398736 and IN00399459.<br><br>Complaint IN00389996-Unsubstantiated due to lack of evidence.<br><br>Complaint IN00398736-Substantiated. State deficiencies related to the allegations were cited at R272.<br><br>Complaint IN00399459-Substantiated. State deficiencies related to the allegations were cited at R272.<br><br>Survey dates: January 18 and 19, 2023<br><br>Facility number: 014019<br><br>Residential Census: 61<br><br>These State Residential Findings are cited in accordance with 410 IAC 16.2-5.<br><br>Quality review was completed on January 25, 2023. | R 0000 | This Plan of Correction constitutes Five Star Residences of Northwoods written allegation of compliance for the alleged deficiency cited. Submission of the Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. This Plan of Correction is submitted to meet requirements established by state and Federal law. Five Star Residences of Northwoods is requesting a desk review to determine compliance (see attached food temperature logs).<br>="" b=""><br>="" b=""><br>="" b=""><br>="" b=""> | |
| R 0272<br><br>Bldg. 00 | 410 IAC 16.2-5-5.1(e)<br>Food and Nutritional Services - Deficiency<br>(e) All food shall be served at a safe and appropriate temperature.<br>Based on observation, interview and record review, the facility failed to ensure food temperatures were being completed prior to food being served for breakfast, lunch and dinner. The deficient practice had the potential to affect 61 of 61 residents residing in the facility. | R 0272 | 1. No residents were found to be affected by the deficient practice. All food will be temped prior to being served to the residents.<br>="" b=""><br><br>2. All residents have the potential | 01/19/2023 |

| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
|---|---|---|
| Douglas Hurlbut | Executive Director | 02/09/2023 |

Any defiencystatement ending with an asterisk (*) denotes a deficency which the institution may be excused from correcting providing it is determin other safegaurds 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 disclo 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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| | Finding includes:<br><br>During a kitchen tour, on 1/19/23 at 11:40 a.m., the BOM (Business Office Manager) was observed serving food onto a plate and handing it to a server to deliver to a resident in the dining room. When she was asked where her food temperatures were, she indicated "What food temperatures?" She did not know the food had to be tempted prior to being served to the residents. The only temperatures she knew she had to look at daily was the cooler and freezer temperatures. The prior Food Service Manager was terminated approximately two weeks ago and she and a Housekeeper were helping out cooking the meals until someone could be hired. She did not receive any training prior to cooking meals for the residents other than what she knew from cooking dinner at home for her family. The last "Daily Food Temperature Sheet" found in the Food Temperature Log book was dated 10/24/22, and only the breakfast meal was filled out with food temperatures.<br><br>During an interview, on 1/19/23 at 12:30 p.m., the ED (Executive Director) indicated the food should always be tempted prior to serving the residents. The housekeeper who was cooking breakfast had been a cook for 17 years prior to transferring into housekeeping two years ago and should have known the food needed to be tempted prior to being served. The facility did not have a food temperature policy. The cooks were to use the "Daily Food Temperature Sheet" as their temperature guide for the safe serving temperatures for hot and cold food items.<br><br>This State finding relates to Complaint IN00398736.<br>This State finding relates to Complaint | | to be affected by the deficient practice. All food will be temped prior to being served to the residents.<br><br>3. Food Service Director or designee will audit food temperature logs weekly to ensure that food is being temped and within guidelines prior to serving residents. Any non-compliance identified will result in re-education of staff in question. Copies of food temperature logs will be turned in to Executive Director or designee monthly.<br><br>4. Food temperature logs will be reviewed by Executive Director or designee to ensure that food temps are in compliance with community and State guidelines. | |

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| | IN00399459. | | | |