

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 045474	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/25/2025
NAME OF PROVIDER OR SUPPLIER The Green House Cottages of Northwest Arkansas		STREET ADDRESS, CITY, STATE, ZIP CODE 1303 NE Legacy Parkway Bentonville, AR 72712	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Number of residents sampled: 11Number of residents cited: facilityBased on observations, interviews, and facility policy review, the facility failed to food was stored properly and dishes were maintained in clean condition and in good repair in one of one facility kitchen. Specifically, the facility failed to ensure food stored in the cabinets, dry storage area and refrigerator were dated; and failed to ensure dishes and utensils were stored in a sanitary manner. This failed practice had the potential to affect 12 residents who resided in [NAME] house and received meals from the kitchen. Findings include: Observation During a concurrent observation and interview on 09/22/2025 at 11:23 AM, one open box of [Brand Name] peanut butter and dark chocolate protein bars, containing 4 individually wrapped bars, and one unopened box of [Brand Name] peanut butter and dark chocolate protein bars, with package indicated 5 individually wrapped bars, both with best if used by dates of 09/21/2025, were not labeled with resident name, room number, or date the boxes were brought into the facility. The two boxes of protein bars were located in the first upper double cabinet, above the telephone, second door, second shelf, to left of single handwashing sink, and were sitting on top of three stacked [NAME] green plates. Certified Nursing Aide (CNA) #1 stated the boxes should not have been stored on the dishes and possibly belonged to a staff member, as no resident name was on the boxes. CNA #1 threw both boxes into a trash can. During a concurrent observation and interview on 09/22/2025 at 11:30 AM, a drawer next to a metal upright beverage cooler/refrigerator contained a clear plastic bag with individual packages of sugar free jelly, a white mesh basket containing two dry erase markers and a round metal thermometer, a clear plastic bag containing two rolls of white labels, one roll of tan colored masking tape, a clear plastic bag of plastic cookie cutters in various shapes and colors, one wooden rolling pin, one metal tong. CNA #1 stated the jelly should not be stored in the drawer with the other items, utensils should not be there, removed the jelly and placed in another cabinet, left the drawer open with utensils remaining in the drawer. During a concurrent observation and interview on 09/22/2025 at 11:51 AM, the dry storage area had a 1-gallon jug labeled [Food Service Company Name] Classic Red Wine Vinegar, had dark brownish red fluid dried on outside of container in run/drip pattern from top to bottom of label. The container had no received or open date. The Dietary Manager (DM) turned the jug, looked at bottom and top and stated this should have an open date on it. A clear plastic zipper bag labeled with a date of 05/07/2025 and a use by date of 08/25/2025, contained ten 0.5 oz packets of [Brand Name] original sauce. The DM (continued on next page)		

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days 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 disclosable 14 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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 045474
		If continuation sheet Page 1 of 2

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F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	identified the date 05/07/2025 as the date the product was received and the use by date was the use by date on the original packaging. The DM explained the [Brand Name] sauce packets were a special occasion purchase and the remaining packets were removed from the original box and the original box was discarded. The DM disposed of packets by placing them in the trash can, stating they should have been disposed of as they were out of date. The DM stated the process when receiving a food supply order was all items were marked with stickers indicating the month, day and year the item was received. When opened, the date was written on the item. If the item was removed from original packaging it was to be placed in a clear zip bag preprinted with a DATE: block and USE BY: block. The DATE: block was filled in when opened and the USE BY: block was filled in using the date from the original packaging. I ordered these bags to make it easy. During an observation on 09/22/2025, one double cabinet in kitchen island, opposite side of sink, contained 2 plastic containers of coffee [Brand Name] blue container and [Brand Name] green container had a received date in 2023 and an expired date printed by manufacturer of 2024. Interview During an interview on 09/22/2025 at 11:20 AM, CNA #1 stated the current census for the [NAME] House was 12. During an interview on 09/22/2025 at 1:45 PM, CNA #2 was unsure of what dating on food items indicated or why use by dating was not filled in on clear plastic zip bags containing food items. Record Review A review of a facility document titled Resident Matrix, dated 09/22/2025 confirmed 12 residents resided in [NAME] House. A review of the facility's undated policy titled, Use By Guidelines, indicated The following guide can be used to determine a 'use by date' when labeling opened or unopened food that must be used within a certain time frame. Please note that this information is only to be used when there is not a guideline on the container of food. All opened containers of food in the dry storage area should be place (sp) in an enclosed container and labeled with content, date opened, and use by date. A review of the facility's undated policy titled, Storage of Food and Beverages Brought by Visitors 42 C.F.R. 483.60, indicated, Foods or beverages brought into the facility by guests or visitors will be labeled with the resident's name, room number, and dated with the current date the item is brought into the Facility for storage outside the resident's room. Storage. The facility shall act promptly to store such food in a safe and sanitary location, . Food or beverages brought into the facility from the outside will be monitored by staff for spoilage, contamination, and safety. Food or beverage in the original container that is past the manufacturer's expiration date will be discarded. Staff will monitor., unit pantry, . for food and beverage disposal for proper labeling, dating and n monitoring for use by dates to discard items when applicable. Facility		