STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	155128	A. Building B. Wing	12/22/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Miller's at Oak Pointe	411 N Wolf Rd Columbia City, IN 46725

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 - Many	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards. Based on observation, interview, and record review, the facility failed to ensure food and kitchen was maintained to prevent food borne illnesses. 48 of 48 residents residing in the facility ate food prepared in the facility kitchen.Findings include:During a kitchen observation on 12/16/2025 9:16 AM, a bag of diced celery in the walk in freezer did not have an opened label or date. A bag of sweet potatoes in the freezer did not have an opened label or date. 3 loose hashbrown wedges were observed lying on the bottom of a cardboard box not enclosed in a plastic bag or any other packaging. In the walk-in refrigerator, 2 covered containers holding a whitish, lumpy substance did not have labels or dates. 4 lidded opaque containers did not have a labels or dates. A container labeled mixed vegetables was dated 12/10/25. A container labeled puree was dated 12/4/25. A block of light yellow substance was on a shelf, partially covered with a piece of wax paper, with parts open to air. There was no label or date on the substance or the paper. A cart holding containers of cereals was observed in the kitchen. On the bottom shelf of the cart, a container of puffed rice cereal was observed unlidded and open to air. The cart was positioned about 5 feet away from the dirty breakfast dishes adjacent to the dishwasher. In an interview, on 12/6/25 at 9:21 AM, the Dietary Manager (DM) indicated the mixed vegetables should have been discarded after 3 days. He indicated the unlabeled containers were filled with potato salad and tomato slices, and the unlabeled yellow block was margarine. He indicated all food items should be labeled and dated. He indicated he was unable to identify the pureed item in the refrigerator, and indicated it should have been discarded. He indicated the hash browns and block of margarine should have been in a sealed bag or container, labeled and dated. He indicated the container of puffed rice should have been tightly sealed with a lid. On 12/16/2025 at 9:34 AM, a dishwasher cycle was observed. The wash cycle reached 160 degrees. The final rinse temperature reached 171. In an interview, on 12/16/2025 9:36 AM, the DM indicated he would restart the dishwasher and retest the temperature of the rinse cycle. If it did not reach 180 degrees during the final rinse cycle, he would call the maintenance man and then call out a service technician if maintenance was unable to fix it. In a record review, on 12/16/2025 9:51 AM, a document titled Dishwasher Temperature Worksheet, provided by the DM on 12/16/25 at 9:50 AM indicated the dishwasher's final rinse temperatures were as follows:12/13/25 Breakfast 17212/14/25 Breakfast 17512/15/25 Breakfast 17612/16/25 Breakfast 177. In an interview, on 12/16/2025 11:03 AM, the DM indicated he had reset the dishwasher and re-checked the temperature readings. He indicated the auxiliary water temperature booster had not been turned on. He indicated staff should have called him immediately when low rinse cycle temperatures were discovered. In an interview, on 12/16/2025 11:18 AM, the DM indicated he did not believe staff understood labeling and dating adequately. He indicated he was relatively new to the position and had not had opportunity to educate staff adequately on labelling and dating. A current policy titled Food Protection and Storage, dated 10/6/2015, provided by the Administrator on 12/16/25 at 2:40 PM indicated open boxes and containers of food should be securely enclosed, labeled and dated. A current policy, titled Dishwasher Temperatures, dated 3/4/2019, provided by the Administrator on 12/16/25 at 2:40 PM, indicated any temperature below minimum should be reported to the dietary manager and corrected prior to washing any dishes. The policy (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	155128	A. Building B. Wing	12/22/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Miller's at Oak Pointe	411 N Wolf Rd Columbia City, IN 46725

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 - Many	indicated the final rinse temperatures for the dishwasher should reach 180 to 190 degrees. A current policy, titled Safe Food Storage Guidelines, dated 4/2025, provided by the Administrator on 12/16/25 at 2:40 PM, indicated cooked meat and poultry leftovers and casserole leftovers should be discarded after 3-4 days. The policy did not specify a time frame for discarding leftover cooked vegetables. 3-1-21(i)(3)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	155128	A. Building B. Wing	12/22/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Miller's at Oak Pointe	411 N Wolf Rd Columbia City, IN 46725

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 0867 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action. Based on interview and record review, the facility failed to ensure quality assurance policies were followed to prevent recurrent deficiencies. 48 of 48 residents lived in the facility.Findings include:The facility annual survey, completed on 11/14/24 identified noncompliance regarding kitchen sanitation. The facility indicated the noncompliance would be corrected by 12/4/24. Please refer to F 812 for additional information related to current kitchen sanitation findings.On 12/16/25 at 11:15 AM, a Quality Assurance Performance Improvement (QAPI) committee list was provided by the facility Administrator. The QAPI committee members included the Administrator, Director of Nursing, Assistant Director of Nursing, Medical Director, MDS Coordinator, Activity Director, Social Service Director, Pharmacy Consultant, Dietary Manager, Housekeeping Supervisor, Maintenance Supervisor and Business Office Manager.In an interview, on 12/22/25 at 10:10 AM, the Administrator indicated there was a Performance Improvement Plan (PIP) in place for the kitchen. The Administrator indicated the Registered Dietician (RD) performed monthly kitchen audits. The Administrator indicated they were not aware of the RD sharing the audit findings with the Dietary Manager. The Administrator reviewed the QAPI binder and was unable to locate any follow up education, in-service records, or monitoring related to the RD audit findings.The Administrator provided the following documents from the QAPI binder:1. RD focused onsite visit worksheet, dated 7/19/25, indicated the kitchen staff had displayed noncompliance in the following:-handwashing-temperature logs-all food items covered, labeled and dated-cleanliness-raw food separate from prepared food-all food stored 6 off floor and 18 from ceiling2. RD focused onsite visit worksheet, dated 9/24/25, indicated the kitchen staff had displayed noncompliance in the following:-handwashing-thermometers (refrigerator and freezer)-temperature logs (refrigerator and freezer)-all food items covered, labeled and dated-cleanliness-raw food separate from prepared food- all food stored 6 off floor and 18 from ceilingIn an interview, on 12/22/25 at 10:55 AM, the Administrator indicated kitchen staff education had been provided by hanging signs in the kitchen. The Administrator provided 3 signs, undated, titled Helpful Reminders About Covering, Labeling and Dating Food, Helpful Reminders About Glove Use and Food Handling, and Helpful Reminders About Handwashing.A current facility policy, dated 11/8/22, indicated Performance Improvement Plans (PIP) would be documented. The PIP documentation would include a timeline for planning actions and follow-up.3.1-52