

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155183	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/30/2024
NAME OF PROVIDER OR SUPPLIER Waters of Martinsville, The		STREET ADDRESS, CITY, STATE, ZIP CODE 2055 Heritage Dr Martinsville, IN 46151	

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)
<p>F 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.</p> <p>38312</p> <p>Based on observation, interview, and record review, the facility failed to ensure resident's grievances were acted upon and promptly resolved for residents who had food concerns for 5 of 5 residents meals reviewed. (Resident B, Resident C, Resident D, Resident E, and Resident F).</p> <p>Findings include:</p> <p>On 12/27/24 at 11:56 a.m., Resident D indicated they had not been receiving desserts or any fruit. During the Resident Council Meeting, resident's had complained about not getting any desserts or any fruit. He did not receive any fruit cocktail at lunch on that day (12/27/24). At that time, Resident D's meal tray was observed not to have any fruit cocktail.</p> <p>On 12/27/24 at 12:00 p.m., Resident B was observed to be in the dining room. He was observed not to have any fruit cocktail.</p> <p>On 12/27/24 at 12:03 p.m., Resident C was observed to be in the dining room. He was observed not to have any fruit cocktail.</p> <p>On 12/27/24 at 12:10 p.m., Resident E was observed to be in the dining room. He was observed not to have any fruit cocktail.</p> <p>On 12/27/24 at 12:15 p.m., Resident F was observed to be in the dining room. She was observed not to have any fruit cocktail.</p> <p>During an interview on 12/27/24 at 12:20 p.m., The Dietary Manager indicated the fruit cocktail was in the refrigerator and they had not given it with the lunch tray.</p> <p>On 12/27/24 at 12:30 p.m., the Director of Nursing (DON) provided the Resident Council Meeting Minutes. The minutes indicated the following:</p> <p>- On 11/20/24 at 2:15 p.m., the new business included, but was not limited to, not getting fruit or desserts with meals.</p> <p>During an interview on 12/27/24 at 12:42 p.m., Resident E was observed to be sitting in the dining room and indicated he was not offered any fruit cocktail.</p> <p>(continued on next page)</p>

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
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<p>F 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 12/27/24 at 12:42 p.m., Resident F was observed to be sitting in the dining room, she indicated she was not offered any fruit cocktail.</p> <p>During an interview on 12/27/24 at 12:44 p.m., Resident B was observed to be sitting in the dining room with his lunch on the table. He was observed not to have any fruit cocktail.</p> <p>During an interview on 12/27/24 at 1:23 p.m., Resident D indicated he was not offered any fruit cocktail.</p> <p>On 12/30/24 at 2:30 p.m., the DON provided the facility's policy, I Would Like to Know, undated, and indicated it was the policy currently being used by the facility. A review of the policy indicated 8. When the root cause is identified, corrective action can be taken to resolve the issue as much to the satisfaction of the resident or the resident's representative as possible .</p> <p>This citation relates to Complaints IN00449830, IN00449840, and IN00450088.</p> <p>3.1-7(a)(2)</p>

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<p>F 0800</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide each resident with a nourishing, palatable, well-balanced diet that meets his or her daily nutritional and special dietary needs.</p> <p>38312</p> <p>Based on interview and record review, the facility failed to ensure residents with orders for house shakes were administered for 9 of 9 residents who had orders for health shakes. (Resident H, Resident J, Resident K, Resident L, Resident M, Resident B, Resident N, Resident O, Resident P)</p> <p>Findings include:</p> <p>During an interview on 12/30/24 at 11:10 a.m., the Dietary Manager (DM) indicated the facility was out of house shakes.</p> <p>During an interview on 12/30/24 at 11:56 a.m., the DM indicated the facility ran out of house shakes sometime over the weekend.</p> <p>On 12/30/24 at 1:00 p.m., the Director of Nursing (DON) presented an Order Listing Report, dated 12/30/24 at 12:54 p.m. The list indicated the following:</p> <ul style="list-style-type: none"> - Resident H had an order for house shakes with meals (start date 5/21/24). - Resident J had an order for house shake three times a day (start date 11/1/24). - Resident K had an order for house shake one time a day for supplement/wound healing (start date 8/20/24). - Resident L had an order for house shake one time a day for wound healing (start date 8/20/24). - Resident M had an order for house shake two times a day (start date 11/20/24). - Resident B had an order for house shake one time a day (start date 10/29/24). - Resident N had an order for house shake with meals (start date 9/20/24). - Resident O had an order for house shake two times a day (start date 11/26/24). - Resident P had an order for house shakes with meals for weight loss (start date 10/8/24). <p>During an interview on 12/30/23 at 1:50 p.m., the Administrator (ADM) indicated the facility ran out of health shakes on Saturday evening. They did not have enough health shakes for Saturday at bed time, all day Sunday, and until lunch on Monday.</p> <p>On 12/30/24 at 2:47 p.m., the ADM provided the facility's policy, Fortified Foods, Two Calorie Med Pass and Other Supplements/Snacks, undated, and indicated it was the policy currently being used by the facility. A review of the policy indicated, .7. All hours Supplements and Snacks that are given between meals will be prepared by the Dining Services Department and delivered to nursing for distribution .</p> <p>(continued on next page)</p>		

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<p>F 0800</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>This citation relates to Complaints IN00449830, IN00449840, and IN00450088.</p> <p>3.1-20(a)</p>

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<p>F 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.</p> <p>38312</p> <p>Based on observation, interview, and record review, the facility failed to follow the menus for 2 of 2 meals observed. (Resident D, Resident B, Resident C, Resident E, Resident F)</p> <p>Findings include:</p> <p>During an tour of the kitchen on 12/27/24 at 10:30 a.m., the Dietary Manager indicated the lunch menu was fried chicken, mashed potatoes, baked beans, and fruit cocktail.</p> <p>On 12/27/24 at 11:56 a.m., Resident D indicated they had not been receiving desserts or any fruit. During the resident council meeting, resident's had complained about not getting any desserts or any fruit. Resident D indicated he did not receive any fruit cocktail at lunch. At that time, Resident D's lunch was observed. Resident D was observed not to have any fruit cocktail.</p> <p>On 12/27/24 at 12:00 p.m., Resident B was observed to be in the dining room. He was observed not to have any fruit cocktail.</p> <p>On 12/27/24 at 12:03 p.m., Resident C was observed to be in the dining room. He was observed not to have any fruit cocktail.</p> <p>On 12/27/24 at 12:10 p.m., Resident E was observed to be in the dining room. He was observed not to have any fruit cocktail.</p> <p>On 12/27/24 at 12:15 p.m., Resident F was observed to be in the dining room. She was observed not to have any fruit cocktail.</p> <p>During an interview on 12/27/24 at 12:20 p.m., the DM indicated the fruit cocktail was in the refrigerator and they had not given it with the lunch tray.</p> <p>On 12/27/24 at 12:30 p.m., the Director of Nursing (DON) provided the Resident Council Meeting Minutes, dated 11/20/24 at 2:15 p.m. The new business indicated the residents were not getting any fruit or desserts with meals.</p> <p>During an interview on 12/27/24 at 12:42 p.m., Resident E was observed to be sitting in the dining room and he indicated he was not offered any fruit cocktail.</p> <p>During an interview on 12/27/24 at 12:42 p.m., Resident F was observed to be sitting in the dining room and she indicated she was not offered any fruit cocktail.</p> <p>During an interview on 12/27/24 at 12:44 p.m., Resident B was observed to be sitting in the dining room with his lunch on the table. He was observed not to have any fruit cocktail.</p> <p>During an interview on 12/27/24 at 1:23 p.m., Resident D indicated he was not offered any fruit cocktail.</p> <p>(continued on next page)</p>		

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<p>F 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 12/30/24 at 11:40 a.m., the menu posted behind the receptionist indicated lunch was nachos, rice, and Dutch apple pie.</p> <p>On 12/30/24 at 11:54 a.m., Resident C was observed to be in the dining room. His lunch was baked beans, rice topped with a brown substance and cheese on top and a dish with marshmallows. No apple pie was observed.</p> <p>On 12/30/24 at 11:55 a.m., Resident D was observed to be in the dining room. His lunch was nachos topped with a brown substance and cheese on top and a dish with marshmallows. No apple pie was observed.</p> <p>On 12/30/24 at 12:10 p.m., Resident B was observed to be in the dining room. His lunch was rice topped with brown substance and cheese on top, baked beans, and a dish with marshmallows. No apple pie was observed.</p> <p>On 12/30/24 at 12:20 p.m., the Activity Director (AD) presented the Resident Council Meeting Minutes, dated 12/27/24 at 2:15 p.m. The old business indicated not getting fruit or desserts with meals. The new business indicated no dessert or fruit with meals. At that time, the AD indicated the residents at Resident Council were still not getting their desserts or fruit with meals.</p> <p>The cook provided a hand written menu for 12/30/24. The lunch menu was nachos, baked beans, rice, and Dutch apple pie.</p> <p>On 12/30/24 at 2:34 p.m., the DON presented the dietician approved lunch menu for 12/27/24 and 12/30/24. The 12/27/24 lunch menu indicated it was approved on 12/20/24 and was grilled hot dog on bun, buttered spinach, cheesy hash brown potatoes, and pineapple upside down cake. The 12/30/24 lunch menu indicated it was approved on 12/20/24 and was country chicken and dumplings, glazed carrots, and diced pears.</p> <p>On 12/30/24 at 2:33 p.m., the DON provided the facility's policy, Menu Substitutions, undated, and indicated it was the policy currently being used by the facility. A review of the policy indicated staff may choose any food within the same list to substitute for the unavailable food .</p> <p>This citation relates to Complaints IN00449830, IN00449840, and IN00450088.</p> <p>3.1-20(i)(4)</p>		