

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155234	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/30/2026
NAME OF PROVIDER OR SUPPLIER Westridge Health Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 125 W Margaret Ave Terre Haute, IN 47802	

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 0802</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide sufficient support personnel to safely and effectively carry out the functions of the food and nutrition service.</p> <p>Based on record review, observation, and interview, the facility failed to ensure sufficient dietary support personnel was implemented per their facility assessment. This deficiency had the potential to affect 44 of 44 residents who receive food from the kitchen. Findings include: Review of a confidential statement, on 1/29/26 at 9:47 a.m., indicated the food was disgusting from the kitchen and the kitchen didn't have enough workers. During an observation during lunch meal service, on 1/29/26 at 12:07 p.m., there were two dietary staff members in the kitchen. There were a Dietary Manager (cook) and a Dietary Aide. The Dietary Manager was the only staff member plating the food for both the dining room and hall trays. The Dietary Manager was unable to provide an additional food item per a resident's request because she stated, I don't have time right now, I have to get all the hall trays ready to go. During an interview, on 1/29/26 at 12:25 p.m., Resident C indicated the food had really gone down hill lately and she refused to eat most of it. She indicated the facility served the same food repeatedly and it wasn't worth eating. Resident C indicated they only had one cook in the facility, and she just couldn't do it all herself. During an interview, on 1/29/26 at 12:40 p.m., Resident F indicated the food was terrible and that they were not offered any alternatives because there was only one cook and she did not have time to cook other food. During an interview, on 1/29/26 at 2:00 p.m., the Administrator indicated the facility should have a full-time Dietary Manager, day cook, evening cook, and a dishwasher. She indicated they had other staff members that could help in the kitchen if needed, for example the Social Service Director, Activity Director, or a Certified Nurse Aide (CNA) in training. During an interview, on 1/29/26 at 3:22 p.m., the Dietary Manager indicated she had been the manager since the first of the year but had been performing the duties since the first part of August 2025. She had been working as the only cook in the building for a while. The facility had hired someone in November to cook but by the first of December he stopped showing up for his shifts and was no longer working at the facility. The Dietary Manager indicated she had been prepping, cooking, and cleaning up all the meals for the residents daily. She worked 14 hours a day, 7 days a week. She had worked over 30 days without a single day off. The Dietary Manager indicated she had not been trained on the computer system and what she needed to do with the computer, she didn't know how to order food in the system, so her Corporate Dietary staff was at the facility once a week to help her order food. The Dietary Manager indicated she was working so much, she did not have time to clean the kitchen properly or get her ServSafe (a leading food safety training and certification program) certification started. The Dietary Manager was unable to keep up with all the tasks that a manager should complete and cook all the food. During an interview, on 1/30/26 at 9:30 a.m., Resident E indicated the facility had staffing issues in the kitchen and her food was often late. She also indicated the quality of food had really declined but she knew there was only so much one person could do. Review of dietary staff schedule indicated the following information: On December 14- December 27, 2025, schedule: a. There was only 2 staff members in the kitchen on</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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F 0802 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	12/15/25 with the Dietary Manager working 13.5 hours. b. There was only 2 staff members in the kitchen on 12/17/25 with the Dietary Manager working 13 hours.c. There was only 2 staff members in the kitchen on 12/20/25 with the Dietary Manager working 14 hours. d. There was only 2 staff members in the kitchen on 12/22/25 with the Dietary Manager working 14 hours. e. There was only 2 staff members in the kitchen on 12/24/25 with the Dietary Manager working 13 hours and 45 minutes. On December 28, 2025 - January 10, 2026, schedule.f. There was only 2 staff members in the kitchen on 12/29/25 with the Dietary Manager working 14 hours. g. There was only 2 staff members in the kitchen on 12/31/25 with the Dietary Manager working 14 hours. h. There was only 2 staff members in the kitchen on 1/5/26 with the Dietary Manager working 14 hours. On January 11 - January 24, 2026, schedule.i. There was only 2 staff members in the kitchen on 1/12/26 with the Dietary Manager working 14 hours. j. There was only 2 staff members in the kitchen on 1/14/26 with the Dietary Manager working 14 hours. k. There was only 2 staff members in the kitchen on 1/15/26 with the Dietary Manager working 14 hours. l. There was only 2 staff members in the kitchen on 1/16/26 with the Dietary Manager working 14 hours. m. There was only 2 staff members in the kitchen on 1/19/26 with the Dietary Manager working 14 hours. n. There was only 1 staff member in the kitchen on 1/20/26 with no cook scheduled. o. There was only 1 staff member in the kitchen on 1/21/26 with the Dietary Manager working 14 hours. p. There was only 2 staff members in the kitchen on 1/22/26 with the Dietary Manager working 14 hours. q. There was only 2 staff members in the kitchen on 1/23/26 with the Dietary Manager working 14 hours. r. There was only 2 staff members in the kitchen on 1/24/26 with the Dietary Manager working 14 hours. According to the dietary schedule the Dietary Manager worked December 16, 2025, until January 19, 2026, without a day off and worked 14 hour days during that time period. On 1/30/26 at 9:05 a.m., the Administrator provided a document dated 1/14/26 with a reviewed date of 1/29/26, titled, Facility Assessment Tool, and indicated it was the policy currently being used by the facility. The assessment indicated, .Staff type.The following types of staff and other professional practitioners reflect the staff necessary to care for the resident population.Food and Nutrition Services (e.g. Director, support staff, registered dietician) .Dietician or other clinically qualified nutrition profession to serve as the director or food and nutrition services (one) .Food and nutrition services staff (3). This citation relates to Intake 2727056. 3.1-20(h)		