

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: 155505	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/01/2025
NAME OF PROVIDER OR SUPPLIER Robin Run Health Center		STREET ADDRESS, CITY, STATE, ZIP CODE 6370 Robin Run W Indianapolis, IN 46268	
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, and interview, the facility failed to maintain clean and sanitary conditions in pantry and pantry refrigerators in 2 of 2 food storage and food preparation areas (Healthcare and Memory Care). This deficient practice had the potential to affect 61 of 62 residents who received solid and liquid oral nutrition. Findings include: A Facility Reported Incident (FRI) during the survey indicated, on 11/14/25, a fire occurred on the Memory Care unit (MC) in the closed pantry which remained locked. Staff were alerted to the fire when smoke was seen and the fire alarm sounded. Staff extinguished the fire, which was noted to be paper towels on top of the stove. On 12/1/25 at 10:12 a.m., observation of the MC pantry with the Housekeeping Supervisor, the Infection Preventionist/Licensed Practical Nurse (LPN) 5, and the Assistant Housekeeping Supervisor. The pantry was observed to have an odor of smoke as the door was opened. There was a space observed between the counter and microwave stand, the Housekeeping Supervisor indicated was from where a stove had previously been placed until a recent fire, and there was an empty fire extinguisher sitting on the floor by the wall. The floors, cabinets, and sink were heavily soiled with unidentified dried liquids and debris, and the sink had standing water from a plugged sink. Underneath the sink was observed to be packed with a large plastic tote containing random objects to include 12 flower vases, a small gray wash pan, a plastic packet of disposable eating utensils, a partially filled water bottle containing pink liquid, and all the objects were heavily coated in dust. A refrigerator was observed to be heavily soiled inside, torn pieces of paper towel were dried to the top glass shelf, and a bagged aluminum food container was on the second shelf without an identifying name or date. LPN 5 indicated the refrigerator was used for resident food and drink storage. The Assistant Housekeeping Supervisor indicated after the fire, on 11/14/25, housekeeping staff had worked hard to clean the pantry and had scrubbed the room with soap and water and chemicals to remove the soot, dry chemical residue from the fire extinguishers, and smoke smell. The Housekeeping Supervisor indicated housekeeping staff were responsible for cleaning the pantry, and the dietary staff were responsible for cleaning the refrigerator. On 12/1/25 at 2:23 p.m., observation of the Healthcare pantry refrigerator with the Administrator (ADM) and Qualified Medication Aide (QMA) 10. The shelves contained a large purple soft sided lunch bag belonging to a QMA, and 2 containers of food for Resident X dated 11/14. There was a black plastic take out container of food, a styrofoam cup of soda and a plastic cup containing a milk shake with a spoon sticking out of the opened top both from restaurant chains, a chicken salad sandwich in a white plastic bag, food stored between two paper plates in a plastic bag, all with no name or dates. The refrigerator doors held an opened half empty bottle of protein drink with no name or date, an uncovered container of vanilla pudding dated 11/29, two mostly empty bottles of water with no name or date, a large metal tumbler with no name or date, a bagged styrofoam container of wilted salad (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
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F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	with mom on the top and no date, and a container of unidentified food that smelled putrid and was entirely covered in bright green mold with no name or date. The ADM indicated she was unsure how long perishable foods could be left in the refrigerator. A memo on green paper taped to the front of the refrigerator indicated, 5/29/24 All food is to be labeled and dated before putting into the refrig/freezer. On 12/1/25 at 2:44 p.m., Dietary Aide 11 was observed placing a tray carrying 12 bagged snacks for residents, onto the top shelf of the refrigerator next to QMA 10's purple lunch bag. The resident snack bags were all dated, had resident names, and listed the contents of the bags. On 12/1/25 at 2:28 p.m., observation of the Healthcare pantry with the ADM and QMA 10. There was a metal ice machine in the corner with the front panel secured shut with white duct tape. Double metal sinks were soiled with unidentified white substances, a squirt bottle of multipurpose cleaner sat on the counter, and the surface of the counter felt gritty and sticky with unidentified substances. A microwave oven mounted over the counter was observed to be soiled both on the outside and inside with food debris. There was a blue bucket, a section of PVC pipe, an opened bottle of dandruff shampoo, and a box of bug killer being stored under the sink. A black 3-tiered utility cart sat next to the wall with 2 metal dispensers labeled coffee and hot water among a copious amount of spilled white granular substance and empty sugar packets on the top shelf. Hot chocolate packets and jelly packets lay on the second shelf next to containers of beverage accoutrements. During an interview on 12/1/25 at 2:53 p.m., the Healthcare Unit Manager (UM) 12 indicated the staff was supposed to keep their food in the staff breakroom refrigerator. UM 12 indicated she was unsure who was responsible for monitoring and cleaning the resident refrigerator in the Healthcare pantry, but she would find out. On 12/1/25 at 3:02 p.m., UM 12 indicated the kitchen staff were supposed to clean the pantry refrigerators monthly, and the supervisors were supposed to monitor and maintain between the dietary cleanings. Quarterly Detail Refrigerator Clean logs for Memory Care and the Healthcare, indicated dietary staff had dated and signed on 1/17/25, 4/21/25, 7/24/25 and 10/22/25. During the exit conference, LPN 13 indicated there was a total of 1 resident who had an enteral feeding tube between the Healthcare and MC units. On 12/1/25 at 3:09 p.m., LPN 5 provided a Refrigerators and Freezers policy, dated December 2014, and indicated the policy was the one currently being used by the facility. The policy indicated, .6. Information regarding acceptable storage periods for perishable foods will be kept in the supervisor's office. A condensed version will be posted by each refrigerator and freezer for reference.8. Supervisors will be responsible for ensuring food items in pantry, refrigerators, and freezers are not expired or past perish dates.10. Refrigerators and freezers will be kept clean, free of debris, and mopped with sanitizing solution on a scheduled basis and more often as necessary. This citation relates to Intake 2669612. 3.1-21(i)(3)		