STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	165442	A. Building B. Wing	06/25/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Woodland Terrace	1922 Fifth Avenue NW Waverly, IA 50677

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 - Some	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** Based on observations, staff interviews, review of facility cleaning calendar, and facility policy review, the facility failed to ensure staff cleaned the stove top. The facility reported a census of 81 residents. Findings include:On 6/22/26 at 11:20 AM an initial tour revealed the Vulcan stove had a build-up of a thick black tacky substance covering the entire stove top. On 6/24/26 at 9:50 AM an observation revealed the Vulcan stove still had a build-up of a thick black tacky substance covering the entire stove top. On 6/24/26 at 9:55 AM Staff B, Cook, indicated they only cleaned the grates but didn't clean the stove top. Staff B also stated, We don't clean it. It's over [AGE] years old. I wouldn't want to start a fire by using a degreaser (grease remover). On 6/24/26 at 9:59 AM the Dietary Manager (DM) indicated the cook's held the responsibility of cleaning the stove. She expected them to scrub it each shift. The DM added the stove's age exceeded 20 years. On 6/24/26 at 10:11 AM the Administrator indicated she expected the staff to clean the stove after every use. On 6/24/26 at 1:15 PM the Administrator spoke with the DM and indicated the Vulcan stove possessed such an advanced age that they couldn't provide a copy of the manufacturer's instruction manual. The Dining Services policy dated 11/10/23 instructed staff that they must construct and situate all food storage, preparation, and distribution equipment so they'd easily clean it and maintain it in a sanitary (clean) manner. It directed staff to keep food preparation areas clean and free of possible sources of infection (germs) by strictly adhering to the Dining Services Policy. The policy noted that the Dining Services Director/Chef had to assure the dietary department remained clean and that sanitation met the requirements. It also stated that Dining Services would adhere to the facility's Infection Control Policies.

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