

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 365271	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/27/2026
NAME OF PROVIDER OR SUPPLIER Carriage Inn of Steubenville		STREET ADDRESS, CITY, STATE, ZIP CODE 3102 St Charles Drive Steubenville, OH 43952	
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 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>Based on observation, interview, record review and review of facility policy the facility failed to ensure the lunch menu and spreadsheets were followed as written. This affected 13 residents (#1, #5, #9, #10, #17, #33, #40, #59, #68, #73, #86, #98 and #100) of 88 residents receiving meals from the kitchen. The facility identified one resident (#83) who did not eat by mouth (NPO). The facility census was 102. Findings include: 1a. Review of the medical record for Resident #9 revealed an admission date of 11/12/18. Pertinent diagnoses included morbid (severe) obesity, type two diabetes mellitus, major depressive disorder. The physician had ordered on 01/16/24 for the resident to receive a reduced concentrated sweets (RCS), regular texture with regular/thin liquids with additional instructions to give fruit for dessert, skim milk per menu, and no bread at lunch and dinner unless a sandwich per menu or requested. Further review of Resident #9's medical record revealed a quarterly Minimum Data Set (MDS) assessment, dated 01/09/26, which indicated the resident was cognitively intact, required setup or clean up assistance with meals, had no significant weight changes, and was receiving a therapeutic diet. Continued review of Resident #9's medical record revealed a care plan, initiated on 02/11/19, which stated the resident was at nutritional risk due having diagnoses which included morbid obesity and type two diabetes and being on a therapeutic diet with interventions which included to provide diet and fluids as ordered and to assess food preferences and honor choices as able. Observations conducted on 02/27/26 of tray line between approximately 11:50 A.M. and 12:22 P.M. revealed at 12:05 P.M. a plate with a piece of white cake topped with a layer of cherry topping and another layer of whipped topping, which was approximately three inches by three inches and two inches tall, was placed on Resident #9's meal tray. The tray ticket sitting on the meal tray indicated Resident #9 was on a RCS regular consistency diet with regular/thin liquids. Further review of the tray ticket revealed the resident was to receive chilled peaches for the dessert. Continued review of the tray ticket revealed at the bottom under the notes section there was a note indicating the resident was to receive fruit for dessert. An interview with Dietary Aide (DA) #325 at the time of the observation confirmed the white cake with fruit topping and a whipped topping had been placed on Resident #9's meal tray. Continued observation of the tray line revealed fruit had been dish up and was available in the two door reach-in refrigerator by the tray line and had been placed on other residents meal trays. 1b. Review of the medical record for Resident #5 revealed an admission date of 02/22/21. Pertinent diagnoses included type two diabetes mellitus, and Alzheimer's. The physician had ordered on 10/21/22 for the resident to receive a RCS, regular texture with regular/thin liquids diet. Further review of Resident #5's medical record revealed a quarterly MDS assessment, dated 01/27/26, which indicated the resident was moderately impaired cognitively, required setup or clean up assistance with meals, had no significant weight changes, and was receiving a therapeutic diet. Continued review of Resident #5's medical record revealed a care plan, initiated on 02/23/26, which stated the resident was at nutritional risk</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 365271
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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>#423 revealed menus were not always followed and went on to state diabetic residents were getting desserts that they shouldn't be getting. RN Supervisor #423 stated everybody got cake today for lunch. Review of the spreadsheet for the facility spring and winter menu for day six of week one revealed the spreadsheets were for regular, mechanical soft, pureed, reduced concentrated sweets, or renal modified diets. At the bottom of the spread sheet there were additional instructions for no salt packet on tray and gluten free diets and for when fortified enhanced foods were ordered. There was no additional guidance for when a combination diet such as an RCS mechanical soft diet had been ordered. Review of the facility policy titled Reduced Concentrated Sweets (RCS) Diet, revised 12/11/25, revealed the RCS diet was designed to moderate simple sugar intake while maintaining adequate nutrition, hydration, resident satisfaction, and quality of life. An RCS diet may limit food high in simple sugars (concentrated sweets) but did not eliminate carbohydrates. Sweetened desserts were one of the examples listed as a concentrated sweets. The policy indicated the facility would provide RCS diets to support blood glucose management for residents with diabetes or impaired glucose tolerance and would prepare meals consistent with RCS guidelines. 3. Review of the facility's fall and winter menu titled Classic Four PB FW 25-26 revealed on day 6 (Friday) of the facility's Week One's menu fish of the day, roasted sweet potatoes, sauteed cabbage, dinner roll/margarine, and fruit shortcake was to be served for lunch. Review of the facility's diet spread sheet lunch on day 6 (Friday) of the facility's fall and winter menu revealed residents who were on a puree diet consistency were to receive one number eight scoop (four ounces) of pureed fish of the day, one tablespoon of mayonnaise, one number eight scoop (four ounces) of pureed sweet potatoes, one number 12 scoop (two and two-third ounces) of pureed sauteed cabbage, one number 16 (two ounces) scoop of pureed dinner roll with margarine, and one number six scoop (five and one third ounces) of pureed fruit shortcake. Review of the facility document titled Order Listing Report, dated 02/27/26, revealed Resident #10, #17, #40 and #100 were ordered a pureed texture diet. Observations conducted on 02/27/26 from approximately 11:50 A.M. to 12:22 P.M. of the facility's tray line revealed there was no observation of any pureed fruit shortcake being around the tray line, and staff were observed placing small plastic bowls filled with vanilla pudding on the meal trays of residents who were on a pureed diet consistency. An interview with Dietary Director (DD) #319 at the time of the observation confirmed residents on a puree diet were getting pudding instead of the pureed fruit shortcake for lunch. When asked why those residents who were on a puree diet were not getting the puree fruit shortcake as stated they would be according to the spreadsheet, DD #319 stated my cook didn't prep the puree fruit shortcake, so they are getting vanilla pudding. An interview conducted on 02/27/26 at 1:57 P.M. with RD #444 and DTR #411 revealed spreadsheets needed to be followed and residents on a puree diet consistency should have received pureed fruitcake instead of the vanilla pudding for lunch that day. Review of the facility policy titled Menus and Adequate Nutrition, revised 01/03/26, revealed the facility would provide residents with nourishing, palatable, well-balanced diets, and menus would be followed. This deficiency represents non-compliance investigated under Complaint Number 2748862.</p>		