

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 365771	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/24/2026
NAME OF PROVIDER OR SUPPLIER Copley Health Center		STREET ADDRESS, CITY, STATE, ZIP CODE 155 Heritage Woods Drive Copley, OH 44321	
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 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>Based on resident interviews, observation of lunch meal, observation of test tray, review of resident council minutes, and review of facility policy, the facility failed to ensure meals were served at a palatable temperature. This had the potential to affect all residents who received meals from the kitchen. The facility identified eight residents (#4, #23, #94, #96, #127, #131 #144, and #149) who were on nothing by mouth (NPO) diet and did not receive food from the facility's kitchen. The facility census was 124. Findings include: Review of the resident council meeting minutes from 03/12/26 revealed residents complained of cold food. Interview on 03/16/26 at 11:09 A.M. with Resident #128 revealed the food was not palatable. Interview on 03/16/26 at 12:19 P.M. with family member of Resident #75 revealed the food was not always hot. Interview on 03/16/26 at 1:34 P.M. with Resident #2 revealed she voiced the food sucks. Interview on 03/17/26 at 8:55 A.M. with Resident #36 revealed the food was not always warm. A resident council meeting was held on 03/17/26 at 3:00 P.M. with Residents #31, #61, #64, #77, and #83. Residents reported food was frequently cold and the kitchen was not always using warming plates to keep food hot. Observation on 03/18/26 from 11:51 A.M. to 1:11 P.M. of the lunch meal service revealed the temperatures at the start of service were 190 degrees Fahrenheit (F) for hot dogs, 175 degrees F for baked beans, and 32 degrees F for coleslaw. At 1:11 P.M. the last cart for hallway trays was completed and contained a test tray. The cart arrived to the unit at 1:13 P.M. and staff completed passing trays at 1:17 P.M. Temperatures were obtained from the test tray by District Manager (DM) #913 using the facility's digital thermometer. Temperatures were 105 degrees F for the hot dog, 109 degrees F for the baked beans, and 36 degrees F for the coleslaw. Taste test of the hot dog and baked beans revealed the food was not a palatable temperature. DM #913 participated in tasting the test tray. Interview on 03/18/26 at 1:17 P.M. with DM #913 confirmed the hot dog and baked beans were not at an acceptable or palatable temperature. Review of the facility policy titled Food: Quality and Palatability dated September 2017 revealed food would be palatable, attractive, and served at a safe and appetizing temperature. This deficiency represents non-compliance investigated under Complaint Number 1273862 (OH00163626) and 1273861 (OH00163574).</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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