

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 07/18/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 366167	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/13/2025
NAME OF PROVIDER OR SUPPLIER Anderson, The		STREET ADDRESS, CITY, STATE, ZIP CODE 8139 Beechmont Ave Cincinnati, OH 45255	
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, interview, facility policy review, and Food and Drug Administration (FDA) guidelines review, the facility failed to ensure food was stored and served in a sanitary manner. Specifically, the facility failed to ensure that kitchen equipment was kept clean, prepared food stored in the walk-in cooler was labeled and dated, and staff wore effective hair restraints in the kitchen. This failed practice had the potential to affect all 91 of 92 residents who received meals from the kitchen. Findings include: 1. Observations in the kitchen on 08/11/2025 at 8:44 AM revealed a dirty toaster with built up grime and crumbs on the tray and conveyor belt wheels. A bulk food storage bin containing rice was dirty with a sticky substance on the lid. During an interview on 08/11/2025 at 8:55 AM, the Kitchen Manager (KM) stated they cleaned bulk food storage bins once a week on Mondays or Tuesdays, so they were due to be cleaned. During an observation on 08/12/2025 at 12:31 PM, the bulk food storage containers continued to appear dirty with a sticky substance on the lid. During an interview on 08/12/2025 at 3:50 PM, the KM stated he did rounds in the kitchen to confirm things were clean. The KM stated he knew the toaster was an issue but it had been that way for a long time. The KM stated he would have to disassemble it to try to clean it. During an interview on 08/13/2025 at 11:30 AM, the Administrator (ADM) stated kitchen staff should clean the kitchen daily. During a telephone interview on 08/13/2025 at 12:59 PM, the Registered Dietitian (RD) stated she was at the facility once a week and was also available by phone and email. The RD stated she regularly completed kitchen walk-throughs with the KM to identify concerns. The RD stated she had encouraged the KM to use a cleaning schedule to ensure things were cleaned regularly. The RD stated she had encouraged the KM to dispose of the bulk storage bins because they rarely used them. Review of the facility policy titled Sanitation, reviewed 08/01/2018, revealed the food service area shall be maintained in a clean and sanitary manner by all dietary staff. The policy indicated All utensils, counters, shelves and equipment shall be kept clean, maintained in good repair and shall be free from breaks, corruptions, open seams, cracks, and chipped areas. 2. Observations in the kitchen on 08/11/2025 at 8:45 AM in the walk-in cooler revealed prepared tuna salad with no date or label. A creamy pasta with a label that read Tuesday, but no date or identification of food item. A prepared item that appeared to be chicken salad with a date but no item description. A prepared item with a date but no item description. A container of what appeared to be tomato soup with no date or label. During an interview on 08/11/2025 at 8:49 AM, the Kitchen Manager (KM) stated the creamy pasta was broccoli soup, but then he corrected himself and stated it was macaroni and cheese. The KM confirmed there was no date on the container. The KM stated the another item looked like chicken salad and had a date but verified there was no description of the item. The KM stated another prepared item that was dated appeared to be ham salad but confirmed it did not have a description. The KM verified a container of tomato soup had no date. The KM stated prepared food items should be dated and it was important to date items to ensure they were not serving spoiled food. During a follow-up interview on 08/12/2025 at 3:50 PM, the KM stated he expected all food items to be labeled and dated. During an interview on 08/13/2025 at 11:30 AM, the Administrator (ADM) stated she expected food in the kitchen to be dated and labeled correctly per the facility policy. During a (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	telephone interview on 08/13/2025 at 12:59 PM, the Registered Dietitian (RD) stated all foods prepared in the kitchen should be dated with a prepared-on date and a discard date. Review of the facility policy titled Food Storage, last reviewed by the facility on 08/01/2018, revealed food items removed from original container must be stored in proper containers with a label and date applied.3. Observation in the kitchen on 08/11/2025 at 8:49 AM revealed the KM in the walk-in cooler with a beard and no beard net. The KM continued to tour the kitchen with the surveyor with no beard net covering his facial hair. Observation on 08/12/2025 at 8:26 AM revealed the KM in the dish room with no beard net or cover for facial hair. During an interview on 08/12/2025 at 11:28 AM, the KM stated he had just arrived the morning before when he came into the walk-in cooler so he had not had a chance to put on his beard net yet. The KM stated he did not think he needed to wear a beard restraint in the dish room. The KM stated he thought he only needed to wear a beard restraint when he was handling food. Observation on 08/12/2025 at 12:07 PM revealed the KM standing at the end of the tray line during the lunch meal service. A beard net was around his neck and his facial hair was not covered by the beard restraint. During an interview on 08/12/2025 at 3:50 PM, the KM stated all staff were expected to wear hair nets or hats in the kitchen. The KM stated he thought they only needed to wear the beard restraint around food. During an interview on 08/13/2025 at 10:41 AM, the Director of Nursing (DON) stated staff should be wearing beard restraints in the kitchen and she had already talked to the KM about it. During an interview on 08/13/2025 at 11:30 AM, the Administrator (ADM) stated she expected all kitchen staff to wear beard restraints, and staff knew that. During a telephone interview on 08/13/2025 at 12:59 PM, the Registered Dietitian (RD) stated she expected food service staff to wear beard restraints any time they were preparing food or were near clean dishes or utensils. Review of the facility policy titled Foodservice Workers Hair Coverings, last reviewed by the facility on 08/01/2018, revealed all employees working in food preparation areas, including chefs, cooks, dishwashers, and anyone else handling food or food contact surfaces, are required to wear a hairnet, beard net (if applicable), or other approved hair covering. The hair restraint must fully cover all hair and be clean and free of visible dirt. [NAME] nets must be worn by employees with facial hair. The purpose of this policy is to prevent hair from contaminating food and food contact surfaces. Review of the FDA's 2022 Food Code, revised in 2022, revealed Chapter 2 Management and Personnel included a section titled 2-402 Hair Restraints, which stated FOOD EMPLOYEES shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively keep their hair from contacting exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES.		

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F 0620 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Not require residents to give up Medicare or Medicaid benefits, or pay privately as a condition of admission; and must tell residents what care they do not provide. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review, review of the admission Agreement, and interview, the facility failed to ensure completion of an admission Agreement for three (#6, #95, and #99) of four sampled residents reviewed for admission agreements. Findings include: Review of the facility admission Agreement, developed 01/14/2020, revealed in the section titled 1 Parties to Contract, included this an Agreement between [Facility Name], nursing home operated by [Corporation Name]. All of the above parties to this contract understand, acknowledge, and agree to all the following terms and conditions without any reservations or exceptions whatsoever, further, the parties acknowledge and agree good and valuable consideration to support each party's obligation. The admission Agreement revealed at Bullet S; The Undersigned: Has read and received the foregoing, certifies the information is correct, and agrees to the terms and conditions of the admission Agreement and addenda material incorporated herein by reference. The admission agreement the resident represents he/she has been verbally advised of and has received the homes basic per diem rate and a schedule of charges for items not covered in the basic per diem and agrees to pay and be liable for any and all health care services at the home. This includes but is not limited to a guarantee of payment for any and all charges not paid by Medicare, Medicaid, and/or other third party payor or in the event that such benefits are or become denied or the Resident is or becomes ineligible for such benefits. Review of the admission record for Resident #6 revealed an admission on [DATE]. The admission record contained no signed admission Agreement. Review of the admission record for Resident #95 revealed an admission on [DATE]. The admission record contained no signed admission Agreement. Review of the admission record for Resident #99 revealed an admission on [DATE]. The admission record contained no signed admission Agreement. The facility was unable to provide documented evidence of signed admission Agreements for Residents #6, #95, or #99. During an interview on 08/13/2025 at 4:19 PM, the admission Director (AD) confirmed they did not have signed admission agreements for Residents #6, #95, and #99. The AD stated the admission agreements should have been signed. The Administrator (ADM) was interviewed on 08/13/2025 at 4:38 PM. The ADM confirmed the facility did not have signed admission agreements for Resident #6, #95, or #99. The ADM further stated it was their expectation for all residents to sign the facility's admission agreement. This citation represents noncompliance discovered during the investigation of Complaint Number 1301534.		