

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 366474	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/20/2026
NAME OF PROVIDER OR SUPPLIER Violet Springs Health Campus		STREET ADDRESS, CITY, STATE, ZIP CODE 603 Diley Road Pickerington, OH 43147	

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 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide enough food/fluids to maintain a resident's health.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review, observation, and interviews, the facility failed to provide double portions as ordered for Resident #3 and failed to provide adequate meal assistance and hydration for Resident #79. This affected two residents (#3 and #79) of the seven residents reviewed for nutrition. The facility census was 54. Findings include: 1. Review of the medical record for Resident #3 revealed an initial admission date of 11/12/25 with the diagnoses including but not limited to metabolic encephalopathy, sepsis due to enterococcus, severe sepsis with septic shock, urinary tract infection, multiple myeloma in remission, severe protein malnutrition, pleural effusion, dry eye syndrome, bariatric surgery status, hypothyroidism, hypotension, anxiety disorder, depression, obstructive sleep apnea, hyperlipidemia,</p> <p>Review of the plan of care dated 11/17/25 revealed the resident required increased caloric, protein, and/or nutrient needs related to presence of impaired skin integrity. Interventions included dietitian to re-evaluate as indicated, encourage fluids, labs as ordered by physician, obtain weight as ordered or as needed, provide diet as ordered, provide supplements, vitamins, and/or minerals as ordered and tube feeding and flush as ordered.</p> <p>Review of the resident's comprehensive Minimum Data Set (MDS) assessment dated [DATE] revealed the resident had no cognitive deficit. Review of the mood and behavior revealed the resident had no indicators of depression and displayed no behaviors including rejection of care. The resident's weight was coded at 98 pounds and had a significant weight loss and was not on a prescribed weight loss regimen.</p> <p>Review of the resident's monthly physician orders for January 2026 identified orders dated 11/13/25 Remeron 7.5 milligrams (mg) by mouth at bedtime for appetite stimulant and 12/10/25 MedPass 2.0 120 milliliters (ml) by mouth twice daily.</p> <p>On 01/12/26 at 10:20 A.M., interview with the resident revealed she was supposed to receive double portions at meals however they do not give her the double portions. The resident lifted the lid of her breakfast tray and stated she received a cinnamon bagel with cream cheese and two servings of rice Krispies for breakfast and had told them she preferred frosted flakes. Observation of the breakfast tray revealed the resident ate the cereal.</p> <p>On 01/12/26 at 12:51 P.M., observation of the lunch meal revealed the resident was served a bowl of chicken and dumplings soup, a serving of carrots and a serving of Jello. The Executive Director (ED) who served the resident her lunch verified the resident was not served double portions for the lunch meal. The ED verified the resident's meal ticket did not indicate the resident was to receive double portions.</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
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<p>F 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>2. Review of Resident #79's medical record revealed an admission date of 09/26/24 with diagnoses to include but not limited to unspecified sequelae of cerebral infarction, dementia, atherosclerotic heart disease, type two diabetes mellitus, vitamin D deficiency, cerebellar stroke syndrome, and muscle weakness.</p> <p>Review of the quarterly Minimum Data Set (MDS) dated [DATE] revealed a Brief Interview for Mental Status (BIMS) was not conducted and a staff assessment of mental status was not conducted. Review of Resident #79's behavior revealed no documented refusals or rejection of care. Additionally, review of Resident #79's functional ability for eating required staff to set up his tray or meals. Review of Resident #79's swallowing abilities revealed no deficits. Furthermore, review of Resident #79's functional abilities for self care revealed that Resident #79 is dependent on staff for all activities of daily living (ADLs).</p> <p>Review of the care plan dated 09/30/24 revealed Resident #79 is at risk for malnutrition related to diagnoses, inadequate nutrient/energy intakes, and/or metabolic demands with interventions to include assist with meals as needed, offer alternate food and beverage items as needed, and provided diet, supplements, medications, and adaptive equipment as ordered.</p> <p>Review of the meal percentages from 01/01/26 to 01/14/26 for Resident #79 revealed no morning or bedtime snack given.</p> <p>Observation on 01/12/26 at 12:36 P.M. of Resident #79 who received his tray which was a regular diet consisting of two hot dogs in buns and French fries.</p> <p>Observation on 01/13/26 at 12:39 P.M. of Resident #79 struggling to cut his ham for lunch, his fruit cup was still covered.</p> <p>Observation on 01/13/26 at 12:55 P.M. of Resident #79 in the dining room, trying to cut his ham, glass is empty and fruit is still covered.</p> <p>Observation on 01/13/26 at 12:58 P.M. of Resident #79 who is eating his cornbread muffin and his fruit is still covered.</p> <p>Observation on 01/13/26 at 12:05 P.M. of Resident #79 sitting in his Broda chair in the dining room with a Styrofoam cup and tray in front of him with his silverware still rolled in his napkin.</p> <p>Observation on 01/14/26 at 8:34 A.M. of Resident #79 semi-lying in bed with his breakfast tray on the bedside table which was to the side of the bed and not in front of Resident #79. Licensed Practical Nurse (LPN) #330 verified that Resident #79 was semi-lying in bed with his breakfast tray on the bedside table which was to the side of the bed and out of Resident #79's reach.</p> <p>Observation on 01/14/26 at 12:42 P.M. of Resident #79 lying in bed trying to drink water from a glass cup for lunch. The Assistant Director of Health Services (ADHS) # 338 verified that Resident #79 was lying in bed and trying to drink his water. Additionally, the ADHS #338 verified that Resident #79's bedside tray was not in front of him and was out of his reach to properly eat his meal.</p> <p>Observation on 01/14/26 at 2:36 P.M. of Resident #79 in the Mayflower dining area and the resident had no fruit or water available.</p> <p>(continued on next page)</p>		

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<p>F 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Observation on 01/14/26 at 3:36 P.M. of Resident #79's water cup on his bedside table which was pushed against the wall and his water cup was out of reach. ADHS #338 verified at the time of the observation that the water cup was out of Resident #79's reach and stated the water cup was empty.</p> <p>Interview on 01/14/26 at 12:22 P.M. with Dietary Services Assistant #368 revealed that the expectation of dining services assistants is unrolling the silverware, serving drinks, and making sure all containers are uncovered.</p> <p>Interview on 01/13/26 at 12:28 P.M. Dietary Services Assistant Director #353 who stated we try to let the residents open their own silverware and food items. If I walk by a few times and see that the resident has not opened their silverware, then I will stop and open the silverware and food items for them.</p> <p>Interview on 01/12/26 at 12:59 P.M. with Resident #79 who stated he did not like hot dogs and the staff didn't offer him anything else.</p> <p>Interview on 01/14/26 at 7:34 A.M. with Certified Nursing Assistant (CNA) #303 who stated that the CNAs give water to the residents who can ask for it. Additionally, CNA #303 stated they do not have a water cart where they pass out water to the residents but must use the styrofoam cups and the CNA's give water to the residents individually.</p> <p>Interview on 01/14/26 at 9:03 A.M. with the ADHS #338 who stated when the resident comes in at admission, we do an assessment for feeding/eating needs and if they need assistance, then they are placed in the private dining room. We reassess residents often to see if the residents need assistance and when we do rounds. We train the CNAs to report if they think the resident needs assistance with meals. ADHS #338 stated the expectation for set-up for meals was to put the tray in front of the residents and if they need something cut up, then the staff is to cut it for the resident.</p> <p>Interview on 01/14/26 at 12:43 P.M. with Dietary Services Assistant #384 who stated that she takes the residents' tray into their room after making sure that the meal ticket is correct. Then she puts the tray on the resident's bedside table, takes off the cover and makes sure the silverware is there, and the meal is ready for the resident to eat.</p> <p>Interview on 01/14/26 at 3:05 P.M. with the DHS who stated there is no facility hydration policy.</p> <p>Interview on 01/14/26 at 4:07 P.M. the DHS who stated that all residents are offered a bedtime snack and not just residents with diabetes.</p> <p>Interview on 01/14/26 at 5:10 P.M. the ADHS #338 verified that Resident #79 can reach for, pick up and drink from a styrofoam cup on his own if the cup is within his reach.</p> <p>Review of the Dining Services Assistant job description undated revealed the dining services assistants are to set up meal trays, food carts, dining room, etc., as instructed.</p> <p>Review of the facility policy Meal Service dated 10/25/25 revealed a nourishing bedtime snack will be provided at bedtime. Additionally, the facility policy Meal Service dated 10/25/25 revealed if an individual is not accepting their food, an appropriate alternate is offered. Substitutions will be offered to residents who consume 75 percent (%) or less. Furthermore, the facility policy Meal Service dated 10/25/25 revealed staff will assist the individual as needed.</p> <p>(continued on next page)</p>		

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F 0692 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	This deficiency represents non-compliance investigated under Complaint Number 2682505.		