STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	366499	A. Building B. Wing	12/31/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Willows at Bowling Green The	525 South Dunbridge Road Bowling Green, OH 43402

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, staff interview, and policy review, the facility failed to ensure proper hand hygiene was practiced during meal service. This had the potential to affect all 35 residents in the facility. The facility census was 35. Observations during meal service on 12/30/25 beginning at 12:17 P.M. revealed [NAME] #136 wearing disposable gloves and using utensils to plate meals. Further observation revealed [NAME] #136 used his right hand to scratch his left upper arm, used his right hand to scoop corn casserole, used his right hand to open the oven, used tongs with his left hand to remove a baked potato and held the baked potato with his left hand while splitting it open with a utensil in his right hand. Continued observation revealed [NAME] #136 using tongs to serve mechanical soft meat onto a plate, then using his right hand to shape the meat into a cohesive mound before using his right hand to pour barbecue sauce on the meat. Continued observation revealed [NAME] #136 using his left and right hands to sprinkle parsley onto individual meal plates. Interview on 12/30/25 at 12:23 p.m. with [NAME] #136 confirmed he used the same gloves to touch multiple utensils and the oven before touching ready-to-eat food items. Continued observation revealed [NAME] #136 washed his hands and put on new disposable gloves and returned to plating food. [NAME] #136 used tongs to place parsley on the plates. Continued observation revealed [NAME] #136 used his left gloved hand to push his glasses up his nose. [NAME] #136 continued to use utensils to plate meals, then, still wearing the same gloves, stood with both hands on his waist. Continued observation revealed [NAME] #136 plated meals using utensils, then picked up oven mitts in both hands, opened the oven and removed a baked potato and held the baked potato with his left hand while using a utensil to split it open. Interview on 12/30/25 at 12:27 P.M. with [NAME] #136 and Dietary Manager #162 confirmed [NAME] #136 did not change his gloves or perform hand hygiene after touching his face, his waist, oven mitts, and the oven door before touching ready to eat foods. DM #162 confirmed ready-to-eat food should not be touched with soiled gloves.Review of the policy, Single-Use Gloves, reviewed 01/2025, revealed staff should change gloves whenever an activity or workstation change occurs, or whenever they become contaminated after touching equipment (such as refrigerator doors); and after touching of hair or face.

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