STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675929	A. Building B. Wing	05/29/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Cedar Creek Nursing and Rehabilitation Center	159 Montague Ave Bandera, TX 78003

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 - Some	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards. Based on observation, interview, and record review, the facility failed to store, prepare, distribute, and serve food in accordance with professional standards for food service safety for 1 of 1 kitchen observed for food and nutrition services. The facility failed to ensure food items were sealed and properly dated in the refrigerator and the pantry. These failures could place residents at risk for food borne illness. Findings included: During an observation on 05/29/2026 at 10:15 AM revealed in the kitchen's standing refrigerator had an opened bag of cut lettuce tied shut, not dated when it was opened, half of a watermelon wrapped in plastic wrap not dated when sliced open, and half a package of sliced ham open to air not sealed or dated with open date. During an observation and interview on 05/29/2026 at 10:18 AM revealed a box of partially used muffin mix was observed to be open and was not closed/sealed and was open to air. The Dietary Supervisor stated the box of muffin mix should have been placed in a zip top bag and dated. He further stated the dating of the bag was so it would be known when the box had been opened to ensure the quality, however they did follow the best if used by date. The Dietary Supervisor stated by placing the box in a zip top bag would prevent cross contamination and the risk of it attracting unwanted pests. During an interview on 05/29/2026 at 10:22 AM the Dietary Supervisor stated the lettuce bag and the half watermelon in refrigerator should have been dated. He further stated they had the watermelon and made salads 2 days prior. The Dietary Supervisor stated he would have preferred the bag of lettuce to be placed in a zip top bag instead of having been tied off. The Dietary Supervisor stated by dating items and sealing them it was part of quality control. During an observation and interview on 05/29/2026 at 10:25 AM [NAME] A was observed making ham sandwiches with the package of ham from the refrigerator. [NAME] A stated the ham should have been put in a zip top, closed and dated when it was opened so the staff would have known how old it was. [NAME] A further stated it could have possibly caused someone to get sick. During an interview on 05/29/2026 at 10:32 AM the Administrator stated items in the kitchen should be appropriately packed, sealed and dated. The Administrator further stated that was so staff would know when food was outdated and for it to be appropriately disposed of. Review of facility's policy, Food storage and Supplies, dated 2012, read, All facility storage areas will be maintained in an orderly manner that preserves the condition of food and supplies. We will ensure storage areas are clean, organized, dry and protected from vermin, and insects. Procedure: 4. Open packages of food are stored in closed containers with covers or in sealed bags, and dated as to when opened. Review of the Food Code, U.S. Public Health Service, U.S. FDA, 2022, U.S. Department of H&HS, revealed, 3-305.11, Food Storage, (A) Food shall be protected from contamination by storing the food: (1) in a clean, dry location; (2) Where it is not exposited to splash, dust, or other contamination.

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