STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING B. WING	09/22/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SILVER BIRCH OF TERRE HAUTE	650 LAFAYETTE AVENUE, TERRE HAUTE, , 47807

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES...	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION...	(X5) COMPLETION DATE
R 0000	INITIAL COMMENTS This visit was for a State Residential Licensure Survey. Survey dates: September 21 and 22, 2026 Facility number: 014291 Residential Census: 112 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review completed on September 24, 2026.	R 0000	ROO This plan of correction is submitted as required under federal and state regulation. This plan of correction does not constitute an admission of liability on the part of the facility, and such liability is hereby specifically denied. The submission of the plan does not constitute an agreement by the facility that the surveyor's findings or conclusions are accurate, that the findings constitute a deficiency, or that the scope and severity regarding any of the deficiencies cited are correctly applied. Please accept this plan of correction as our credible allegation of compliance.	
R 0273	Food and Nutritional Services - Deficiency 410 IAC 16.2-5-5.1(f) (f) All food preparation and serving	R 0273	R 273 It is the practice of this community to ensure proper food storage and expired foods	09/25/2026

	areas (excluding areas in residents ' units) are maintained in accordance with state and local sanitation and safe food handling standards, including 410 IAC 7-24. Based on observation, interview, and record review, the facility failed to ensure food was stored properly and failed to dispose of expired foods properly during 1 of 2 kitchen observations. This deficient practice had the potential to affect 112 out of 112 residents who received food from the kitchen. Findings include: During an initial tour of the kitchen with the Culinary Manager, on 09/21/26 at 10:10 a.m., the following was observed: a. In the walk-in refrigerator there was a clear plastic container that contained prepared vanilla pudding. The date on the pudding was 9/10/26. b. In the walk-in refrigerator there was a silver pan of muffins. The muffins were not completely covered by the clear plastic wrap and a whole row of muffins were uncovered on the top shelf. c. In the stand-alone refrigerator there was a clear plastic		are properly disposed of. 1. **What corrective action(s) will be accomplished for those residents to have been affected by the deficient practice?** The container of vanilla pudding, pan of muffins and container of tomato soup were all discarded. All other food items were identified and dated appropriately using the date of receipt, preparation and use by dates. 2. **How will the facility identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?** All residents have the potential to be affected. The AM and PM Cook will take responsibility to properly store and dispose of foods of expiration. Any non-compliance will be corrected at the time of discovery.	

container that contained prepared tomato soup. The date on the soup was 9/16/26.

During an interview, on 9/21/26 at 10:20 a.m., the Culinary Manager indicated prepared food was good for three to four days, then it should be discarded and food should remain covered in the refrigerators. The dates on the food items were the dates the food was placed in the refrigerators by staff. She further indicated she would normally go through the refrigerators, and freezer, to make sure any outdated food was discarded, but she had not gotten around to it yet this morning.

On 9/22/26 at 9:35 a.m., the Culinary Manager provided a document, with a revised date of 1/20/20, titled, "Food Storage," and indicated it was the current policy used by the facility. The policy indicated, "...Food items should be stored, thawed, and prepared with good sanitary practice...All products should be dated upon receipt and when they are prepared. Use 'use by dates' on all food stored in refrigerators and use dates according to the timeline in the Dry, Refrigerated, and Freezer Storage Chart...5. All cooked meat should be used within 3-4 days of cooking...38. Most vegetables should be used

3. **What measures will be put into place and what systematic changes the facility will make to ensure that the deficient practice does not occur?**

   The Culinary Manager will inservice all culinary staff by October 5, 2026, regarding proper food storage procedures and disposal of expired foods that all products should be dated upon receipt when prepared and to use “use by dates” on all foods stored in refrigerators and to use the dates according to the timetable listed in the policy, “Food Storage”.

4. **How the corrective action(s) will be monitored to ensure the deficient practice will not recur, ie., what quality assurance program will be put into place?**

   The Culinary Manager will conduct random audits as part of the QAPI process to ensure all food items are properly stored and dated in accordance with policy, 5x a week for 4 weeks,

	within 3-5 days...60. Any opened products should be placed in seamless plastic or glass containers with tight-fitting lids and labeled and dated...."		3x a week for 4 weeks and 1x a week for 4 weeks. Any noncompliance will be reported to the QAPI committee for further recommendations. Audits will be complete once 100% compliance has been maintained for 4 weeks. 5. **By what date the systematic changes will be completed?** October 5, 2026	

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting provided it is determined that other safeguards provide sufficient protection to the patients. (See instructions.)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATUREJill Stott	TITLEAdministrator	(X6) DATE09/30/2026