

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 09/03/2026	
NAME OF PROVIDER OR SUPPLIER PARK PLACE HEALTH AND WELLNESS CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 10820 PARK PLACE, SAINT JOHN, , 46373					
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES...	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION...			(X5) COMPLETION DATE	
K 0000	INITIAL COMMENTS A Post Survey Revisit (PSR) to the Life Safety Code Recertification and State Licensure Survey conducted on 07/20/26 was conducted by the Indiana Department of Health. Survey Date: 09/03/26 Facility Number: 017974 Provider Number: N/A AIM Number: N/A At this Life Safety Code survey, Park Place Health and Wellness Center was found in compliance with Requirements of the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 19, Existing Health Care Occupancies and 410 IAC 16.2. This facility is separated by three distinct buildings identified as Building 1, Building 2, and Building 3. Building 1 (10810 -	K 0000					

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Faith) is located to the North of the main building. It is a one-story building and was determined to be of Type V (111) construction and fully sprinklered. Building 1 has 13 beds. Building 2 (10820 - Main) is a two-story building and was determined to be of Type II (111) construction and fully sprinklered. Building 2 has 15 beds on the first floor and 15 beds on the second floor. Building 3 (10830 - Hope) is located to the South of the main building. It is a one-story building and was determined to be of Type V (111) construction and fully sprinklered. Building 3 has 13 beds. The facility has smoke detection in corridors and areas open to the corridor. Smoke detectors hard-wired to the fire alarm system are installed in all resident rooms. The hard-wired smoke detectors are connected to the facility's fire alarm system and provide a visual and audible signal at all nurses' station and main foyer entrance; The fire alarm system transmits to a central station service. All three buildings have emergency power supplied by a 250-kW diesel-powered generator. The facility has a total capacity of 56 beds and had a census of 49 at the time of this survey.

All areas where residents have customary access were

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FORM APPROVED

OMB NO. 0938-0391

sprinklered and all areas providing facility services were sprinklered. Quality Review completed on 09/04/26			
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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 SIGNATURE	TITLE	(X6) DATE
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