

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 08/18/2026	
NAME OF PROVIDER OR SUPPLIER CEDAR CREEK OF FRANKLIN		STREET ADDRESS, CITY, STATE, ZIP CODE 1435 CHRISTIAN BLVD, FRANKLIN, , 46131					
(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: August 17 and 18, 2026 Facility number: 004017 Residential Census: 23 This State Residential Finding is cited in accordance with 410 IAC 16.2-5. Quality review completed August 19, 2026.	R 0000	What corrective action will be accomplished for those residents found to have been affected by the deficient practice: No residents were identified as having been adversely affected by the deficient practice. Upon identification of the concern, the dumpster lid was immediately closed and the dumpster area was inspected to ensure the lid was properly secured and the area was maintained in a clean and sanitary condition. 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: The facility immediately inspected all dumpster and waste disposal areas to ensure that dumpster lids and doors were closed when not in active use. Any identified concerns were corrected immediately.				

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			What measures will be put in place & how the corrective actions will be monitored to ensure the deficient practice will not recur: Reeducation will be provided to the staff. Twice daily Maintenance Director or his designee will audit the dumpster area.	
R 0155	Sanitation and Safety Standards - Deficiency 410 IAC 16.2-5-1.5(I) (I) The facility shall have an effective garbage and waste disposal program in accordance with 410 IAC 7-24. Provision shall be made for the safe and sanitary disposal of solid waste, including dressings, needles, syringes, and similar items. Based on observation, interview, and record review, the facility failed to ensure the facility's dumpster container lids were closed when not in use and the area was free of insects for 2 of 3 observations. Findings include: During the initial kitchen tour with the Dietary Manager on 8/17/26 from 9:30 a.m. to 9:35 a.m., the facility's two trash dumpster containers, located adjacent to the kitchen's rear	R 0155	What corrective action will be accomplished for those residents found to have been affected by the deficient practice: No residents were identified as having been adversely affected by the deficient practice. Upon identification of the concern, the dumpster lid was immediately closed and the dumpster area was inspected to ensure the lid was properly secured and the area was maintained in a clean and sanitary condition. 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: The facility immediately inspected all dumpster and waste disposal areas to ensure that dumpster lids and doors were closed when not in active use. Any identified concerns	08/21/2026

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door, were observed. Each trash dumpster contained two separate lids. Three of the four dumpster lids were observed to not be closed. Multiple filled trash bags were observed to be piled high above the insides of the dumpsters and on top of the closed lid. Multiple insects were observed flying in and around the dumpster containers. No staff persons were observed near the trash dumpster area at that time.

During a follow-up observation with the Dietary Manager on 8/17/26 from 12:20 p.m. to 12:23 p.m., the facility's two trash dumpster containers, located adjacent to the kitchen's rear door, were observed. Each trash dumpster contained two separate lids. Three of the four dumpster lids were observed to not be completely closed due to a twelve inch gap between the lid and the container. Within that gap, multiple filled white trash bags were observed sticking out between the lids and dumpster containers. Multiple insects were observed flying in and around the dumpster container area. No staff persons were observed near the trash dumpster area at that time.

During an interview on 8/17/26 at 12:30 p.m., the Dietary Manager indicated the dumpster containers were supposed to be

were corrected immediately.

What measures will be put in place & how the corrective actions will be monitored to ensure the deficient practice will not recur:

Reeducation will be provided to the staff. Twice daily Maintenance Director or his designee will audit the dumpster area.

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kept closed when not in use.

During an interview on 8/17/26 at 12:55 p.m., the Executive Director indicated the facility did not have a policy for keeping the dumpster container lids closed when not in use. The Executive Director indicated the dumpster container lids were to be kept closed when not in use. The area was to be kept clean and free of insects.

On 8/17/26 at 3:30 p.m., a review of the Retail Food Establishment Sanitation Requirements - Title 410 IAC (Indiana Administrative Code) 7-26, effective April 16, 2025, indicated, "...receptacles and waste handling units for refuse, recyclables and returnables used with materials containing food residue and used outside...must be designed and constructed to have tight fitting lids, doors or covers...must be installed so that accumulation of debris and rodent or insect attraction or harborage or both are minimized..."

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
SIGNATUREJulia Berry

TITLEExecutive Director

(X6) DATE09/10/2026