STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING B. WING	04/27/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CEDAR CREEK OF LOGANSPORT	3901 HIGH STREET RD, LOGANSPORT, , 46947

(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. This visit included the Investigation of Intakes 468453 and 468512. Intake 468453-No deficiencies related to the allegations were cited. Intake 468512-No deficiencies related to the allegations were cited. Survey dates: April 24 and 27, 2026. Facility number: 004441 Residential Census: 49 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review was completed on May 1, 2026.	R 0000		

R 0117	Personnel - Deficiency 410 IAC 16.2-5-1.4(b) (b) Staff shall be sufficient in number, qualifications, and training in accordance with applicable state laws and rules to meet the twenty-four (24) hour scheduled and unscheduled needs of the residents and services provided. The number, qualifications, and training of staff shall depend on skills required to provide for the specific needs of the residents. A minimum of one (1) awake staff person, with current CPR and first aid certificates, shall be on site at all times. If fifty (50) or more residents of the facility regularly receive residential nursing services or administration of medication, or both, at least one (1) nursing staff person shall be on site at all times. Residential facilities with over one hundred (100) residents regularly receiving residential nursing services or administration of medication, or both, shall have at least one (1) additional nursing staff person awake and on duty at all times for every additional fifty (50) residents. Personnel shall be assigned only those duties for which they are trained to perform. Employee duties shall conform with written job descriptions.	R 0117	*Submission of this response and Plan of Correction is NOT a legal admission that a deficiency exists or, that this Statement of Deficiencies was correctly cited, and is also NOT to be construed as an admission against interest by the residence, or any employees, agents, or other individuals who drafted or may be discussed in the response or Plan of Correction. In addition, preparation and submission of this Plan of Correction does NOT constitute an admission or agreement of any kind by the facility of the truth of any facts alleged or the correctness of any conclusions set forth in this allegation by the survey agency.* **R 117 410 IAC 16.2-5-1.4(b) Personnel - Deficiency** **1. What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice:** An audit took place on 5/6/2026 of staff charts to identify all staff members who did not hold a current “hands on” CPR and first aid certification. All staff had online CPR certification. Those staff members who were identified as not having “hands on” CPR certification will be scheduled to attend future “hands on” CPR classes held by the community. DON and ED will review the staffing schedule	06/12/2026

	Based on record review and interview, the facility failed to ensure staff met the requirements of Cardiopulmonary Resuscitation (CPR) training for 11 of 21 shifts reviewed. Findings include: During a record review, on 4/27/26 at 11:20 a.m., multiple shifts from Sunday 4/12/26 through Saturday 4/18/26 were not staffed with CPR certified staff from an acceptable skilled program. The dates and shifts included were: a. Sunday, 4/12/26, had no CPR coverage for day shift, evening shift and night shift. b. Monday, 4/13/26, had no CPR coverage for day shift and night shift. c. Tuesday, 4/14/26, had no CPR coverage for day shift. d. Wednesday, 4/15/26, had no CPR coverage for day shift, evening shift and night shift. e. Friday, 4/17/26, had no CPR coverage for evening and night shift. A job description for the Licensed Practical Nurse/Registered Nurse and Qualified Medication Aid (QMA) indicated to perform the job		to ensure there is CPR and first aid coverage 24 hours a day. **2. How the facility will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken:** All residents had the potential to be affected by this deficient practice. DON and ED will review the staffing schedule to ensure there is CPR and first aid coverage 24 hours a day. CPR and first aid classes will be held at the community for staff to get their certification updated that includes “hands on” CPR training. **3. What measure will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not reoccur:** The Executive Director (ED) and Director of Nursing (DON) were re-educated on 5/11/2026 on the Indiana State rule to meet the 24-hour scheduled and unscheduled needs of the residents and services. Current staff who are not CPR first aid certified will be scheduled for future classes held by the community. New staff will be screened upon hire to ensure their certifications are up to date. An up-to-date list will be kept with all the staff names	

	successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skills, and abilities required. The CPR or Basic Life Support (BLS) certification was preferred. During an interview, on 4/27/26 at 12:45 p.m., the Clinical Support Nurse indicated the facility did not have policy on CPR. The facility followed the state regulations. During an interview, on 4/27/26 at 1:30 p.m., the Interim Executive Director indicated they had multiple staff who had only completed an internet CPR course.		who are current with their certifications to ensure 24-hour CPR first aid coverage. DON and/or ED will review the staffing schedule to ensure there is CPR and first aid coverage 24 hours a day. **4. How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place:** The Executive Director is responsible for sustained compliance. The ED/designee will complete audits by reviewing the staffing schedule weekly for 4 weeks, biweekly for 4 weeks, then monthly for 1 month to ensure there is 24-hour CPR first aid coverage. The audit will be discussed at monthly QI meetings. The QI Committee will determine if continued auditing is necessary based on 3 consecutive months of compliance. Monitoring will be on-going. **5. By what date will the systemic changes be completed?** June 12, 2026	

	The American Red Cross accessed on 4/27/26 at https://www.redcross.org/local/indiana/take-a-class/cpr indicated " ...In Indiana, CPR classes are available in person, online, and via our blended Simulation Learning experience, which combines online coursework with in-person skills sessions. Although successful completion of any of our CPR classes results in a two-year certification, online-only courses do not allow you to demonstrate your skills to a certified instructor and therefore may not meet the requirements for workplace safety certification...."			

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 SIGNATUREJim Clindaniel	TITLEExecutive Director	(X6) DATE05/13/2026