

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 02/10/2025
NAME OF PROVIDER OR SUPPLIER FIVE STAR RESIDENCES OF LAFAYETTE		STREET ADDRESS, CITY, STATE, ZIP CODE 250 SHENANDOAH DRIVE, LAFAYETTE, , 47905			
(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 the Investigation of Complaint IN00452620. Complaint IN00452620-State deficiencies related to the allegations are cited at R0052 and R0117. Survey date: February 10, 2025 Facility number: 014015 Residential Census: 77 These State Residential Findings are cited in accordance with 410 IAC 16.2-5. Quality review was completed on February 24, 2025.	R 0000			
R 0052	Residents' Rights - Offense 410 IAC 16.2-5-1.2(v)(1-6) (v) Residents have the right to be free from: (1) sexual abuse;	R 0052	A code status audit was completed on 2/20/2025. All residents with a DNR designation have a copy of their POST form on the back of their	02/20/2025	

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- (2) physical abuse;
- (3) mental abuse;
- (4) corporal punishment;
- (5) neglect; and
- (6) involuntary seclusion.

Based on interview and record review, the facility failed to ensure a resident was free from neglect when the facility failed to have a Cardiopulmonary Resuscitation (CPR) certified staff member on duty and a staff member failed to provide CPR to 1 of 1 resident reviewed for neglect. (Resident B)

Findings include:

An Indiana Department of Health Intake Information, dated 2/3/25, indicated QMA 2 and CNA 3 did not perform CPR for Resident B when the resident was found unresponsive, not breathing and had no pulse, on 2/2/2025. The Executive Director (ED) was notified. 911 was called, paramedics arrived, and Resident B was pronounced dead.

apartment door (form is turned backwards so no resident information is in sight), along with their photo. Residents who are a full code do not have anything hanging on the back of their door.

Employee inservices were held to educate staff on this updated procedure on 2/19/25 and 2/20/25.

New residents and code status changes will be updated upon receiving POST forms. Quarterly audits for DNR/Full Code declination are in effect with this new procedure and will begin in April of 2025. This audit will be completed by the Director of Health and Wellness or a designee.

The community was utilizing an online recertification program from the American Healthcare Academy for cpr and 1staid. All shifts were covered with at least one cpr/1staid certified employee utilizing this practice. We were unaware that this practice was not recognized by ISDH.

Upon learning this, the community immediately scheduled two in person, on site cpr and 1staid class. The classes were held on 2/14/2025 and 2/20/2025. Between these two classes all care team staff hired at the time were trained aside from 2 part time

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The clinical record for Resident B was reviewed on 2/10/25 at 1:43 p.m. The diagnoses included, but were not limited to, Parkinson's disease, hypertension and type 2 diabetes mellitus.

A care plan, dated 1/1/23, indicated Resident B was to receive CPR if he was unresponsive, had no pulse, and was not breathing. The resident was a full code.

An Indiana Physician's Order for Scope and Treatment (POST) form for Resident B, dated 1/8/23, indicated the resident was a full resuscitation code. The order was signed by the physician.

A nursing note, dated 2/2/25, indicated the resident was found nonresponsive, not breathing, and cold to touch with no pulse at 3:26 a.m. 911 was called at 3:27 a.m. 911 staff pronounced the resident deceased at 3:34 a.m.

During an interview, on 2/10/25 at 2:35 p.m., the Director of Health and Wellness indicated the resident should have received CPR. She did not know why QMA 2, and CNA 3 did not administer CPR.

During an interview, on 2/10/25 at 2:47 p.m., QMA 2 indicated she had found the resident unresponsive, not breathing,

employees who were already certified and one prn nurse, whom is seeking certification on her own. New employees will be certified in our next class.

The community plans to offer a quarterly in person, on site cpr and 1staid class to encompass new employees and recertify currently licensed employees.

The community will do monthly cpr/1staid audits to ensure that every shift is covered as soon as the monthly schedule is posted. We will do this for three months beginning in March, 2025.

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and with no pulse. She did not start CPR because she was unsure if the resident was a do not resuscitate or a resuscitate. She indicated she called 911 and notified the ED. She stayed with the resident until the paramedics pronounced him dead. She was not aware her CPR certification was completely invalid without hands on skills.

The CPR certification for QMA 2 indicated she had completed the written class content but had not completed the hands-on skills validation to certify CPR administration.

The CPR certification for CNA 3 indicated she had completed the written class content but had not completed the hands-on skills validation to certify CPR administration.

A review of the facility staffing, on 2/2/25, indicated the facility did not have a certified CPR staff member available for the 3rd shift.

A current facility policy, titled "Emergency Response - Cardiac and Respiratory Arrest," dated 2/1/25 indicated "...3. If the resident is not breathing and you cannot locate a pulse within 10 seconds, identify if the resident is a Full Code or DNR before proceeding...5. If the resident is a FULL

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CODE...INITATE CPR-Only team members that are certified in CPR may initiate CPR...."

CPR Training in Indiana (last dated 2025) and retrieved on 2/24/25 from The American Red Cross indicated "...In Indiana...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...After successfully completing your CPR training in Indiana your certification will be good for two years...."

FAQs about AHA Training (last dated 2025) and retrieved on 2/24/25 from The American Heart Association indicated "...Q: Can I take an AHA CPR course online? A: For American Heart Association courses that include psychomotor skills such as CPR, students must complete a hands-on skills session to obtain an AHA course completion card. With AHA blended learning, students will practice and test skills to ensure competency during the hands-on skills session...."

This citation relates to Complaint IN00452620.

Based on interview and record

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review, the facility failed to ensure a resident was free from neglect when the facility failed to have a Cardiopulmonary Resuscitation (CPR) certified staff member on duty and a staff member failed to provide CPR to 1 of 1 resident reviewed for neglect. (Resident B)

Findings include:

An Indiana Department of Health Intake Information, dated 2/3/25, indicated QMA 2 and CNA 3 did not perform CPR for Resident B when the resident was found unresponsive, not breathing and had no pulse, on 2/2/2025. The Executive Director (ED) was notified. 911 was called, paramedics arrived, and Resident B was pronounced dead.

The clinical record for Resident B was reviewed on 2/10/25 at 1:43 p.m. The diagnoses included, but were not limited to, Parkinson's disease, hypertension and type 2 diabetes mellitus.

A care plan, dated 1/1/23, indicated Resident B was to receive CPR if he was unresponsive, had no pulse, and was not breathing. The resident was a full code.

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The order was signed by the
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During an interview, on 2/10/25
at 2:35 p.m., the Director of
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received CPR. She did not know
why QMA 2, and CNA 3 did not
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During an interview, on 2/10/25
at 2:47 p.m., QMA 2 indicated
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start CPR because she was
unsure if the resident was a do
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She indicated she called 911
and notified the ED. She stayed
with the resident until the
paramedics pronounced him
dead. She was not aware her
CPR certification was
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on skills.

The CPR certification for QMA 2
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the written class content but had
not completed the hands-on
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administration.

The CPR certification for CNA 3 indicated she had completed the written class content but had not completed the hands-on skills validation to certify CPR administration.

A review of the facility staffing, on 2/2/25, indicated the facility did not have a certified CPR staff member available for the 3rd shift.

A current facility policy, titled "Emergency Response - Cardiac and Respiratory Arrest," dated 2/1/25 indicated "...3. If the resident is not breathing and you cannot locate a pulse within 10 seconds, identify if the resident is a Full Code or DNR before proceeding...5. If the resident is a FULL CODE...INITATE CPR-Only team members that are certified in CPR may initiate CPR...."

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	completing your CPR training in Indiana your certification will be good for two years...." FAQs about AHA Training (last dated 2025) and retrieved on 2/24/25 from The American Heart Association indicated "...Q: Can I take an AHA CPR course online? A: For American Heart Association courses that include psychomotor skills such as CPR, students must complete a hands-on skills session to obtain an AHA course completion card. With AHA blended learning, students will practice and test skills to ensure competency during the hands-on skills session...." This citation relates to Complaint IN00452620.			
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	R 0117	The community was utilizing an online recertification program from the American Healthcare Academy for cpr and 1st aid. All shifts were covered with at least one cpr/1st aid certified employee utilizing this practice. We were unaware that this practice was not recognized by ISDH. Upon learning this, the community immediately scheduled two in person, on site cpr and 1st aid class.	02/20/2025

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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.

Based on interview and record review, the facility failed to ensure staff on duty met the requirements of Cardiopulmonary Resuscitation (CPR) to include hands-on skills validation training for 20 of 21 shifts reviewed for CPR. (20 of 21 shifts)

Findings include:

A review of the as worked employee schedule, on 2/10/25 at 3:50 p.m., indicated during the week of 2/1/25 through 2/7/2025, the facility had 20 out of 21 shifts without a certified staff member with hands-on skills validation training.

During an interview, on 2/10/25 at 4:08 p.m., the Director of Nursing indicated CPR training had been completed online. She was not aware CPR training

The classes were held on 2/14/2025 and 2/20/2025. Between these two classes all care team staff hired at the time were trained aside from 2 part time employees who were already certified and one prn nurse, whom is seeking certification on her own. New employees will be certified in our next class.

The community plans to offer a quarterly in person, on site cpr and 1st aid class to encompass new employees and recertify currently licensed employees.

The community will do monthly cpr/1st aid audits to ensure that every shift is covered as soon as the monthly schedule is posted. We will do this for three months beginning in March, 2025.

required hands-on skills validation training for staff members. She indicated the facility did not have a policy which addressed the requirements of the CPR training.

CPR Training in Indiana (last dated 2025) and retrieved on 2/24/25 from The American Red Cross indicated "...In Indiana...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...After successfully completing your CPR training in Indiana your certification will be good for two years...."

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This citation relates to
Complaint IN00452620.

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FORM APPROVED

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OMB NO. 0938-0391

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...After successfully completing your CPR training in Indiana your certification will be good for two years...."

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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