STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING B. WING	03/30/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GLASSWATER CREEK OF LAFAYETTE, LLC	208 BECK LANE, LAFAYETTE, , 47909

(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 Post Survey Revisit (PSR) to Investigation of Complaint IN00398338 completed on January 19, 2023. This visit was in conjunction with the PSR to the Investigation of Complaint IN00393077 completed on October 28, 2022. This visit was in conjunction with the PSR to the Investigation of Complaint IN00401170 completed on February 8, 2023. Complaint IN00398338 - Corrected Complaint IN00393077 - Corrected Complaint IN00401170 - Corrected Survey date: March 30, 2023 Facility number: 014148 Residential Census: 130 Glasswater Creek of Lafayette, LLC was found to be in	R 0000		

	compliance with 410 IAC 16.2-5 in regard to the PSR to Investigation of Complaint IN00398338. Quality review completed on April 4, 2023.			

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