| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 155338 | A. BUILDING _____ B. WING _____ | C 05/26/2021 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **MAJESTIC CARE OF AVON** | **445 S COUNTY ROAD 525 E AVON, IN 46123** |

| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETION DATE |
|---|---|---|---|---|
| F 000 | INITIAL COMMENTS | F 000 | | |

This visit was for the Investigation of Complaints IN00347891, IN00352568, IN00352639, and IN00353050. This visit included a COVID-19 Focused Infection Control Survey.

Complaint IN00347891 - Substantiated. No deficiencies related to the allegations are cited.

Complaint IN00352568 - Substantiated. No deficiencies related to the allegations are cited.

Complaint IN00352639 - Unsubstantiated due to lack of evidence.

Complaint IN00353050 - Substantiated. No deficiencies related to the allegations are cited.

Survey dates: May 24, 25, and 26, 2021

Facility number: 000231
Provider number: 155338
AIM number: 100267900

Census Bed Type:
SNF: 6
SNF/NF: 89
Total: 95

Census Payor Type:
Medicare: 8
Medicaid: 73
Other: 14
Total: 95

Majestic of Avon was found to be in compliance with 42 CFR Part 483, Subpart B and 410 IAC 16.2-3.1 in regard to the Investigation of

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
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|---|---|---|---|---|
| F 000 | Continued From page 1<br>Complaints IN00347891, IN00352568, IN00352639, and IN00353050, and the COVID-19 Focused Infection Control Survey.<br><br>Quality review completed on May 27, 2021. | F 000 | | |