

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 11/20/2025
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155699	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/06/2025
NAME OF PROVIDER OR SUPPLIER Envive of Hartford City		STREET ADDRESS, CITY, STATE, ZIP CODE 715 N Mill St Hartford City, IN 47348	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public. (continued on next page)		

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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: 155699	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/06/2025
NAME OF PROVIDER OR SUPPLIER Envive of Hartford City		STREET ADDRESS, CITY, STATE, ZIP CODE 715 N Mill St Hartford City, IN 47348	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure carpeting in resident rooms, hallways and common areas were clean and free from stains for 2 of 2 units in the facility (100 hall and 200 hall). This deficient practice had the potential to impact 25 of 25 residents who resided in the facility. Findings include: Confidential interviews were conducted during the survey. During a confidential interview, it was indicated the hallways had spots or stains. The facility said they would have the carpet cleaned. It was at least five months since they shampooed it. It needed a good scrub. During a confidential interview, it was indicated the facility shampooed the carpet once in a while, but not often. During a confidential interview, it was indicated there had been spots on hallway carpets for quite a while. During a confidential interview, it was indicated there was heavy staining on the carpet in empty resident rooms. During a confidential interview, it was indicated the facility did not have a way to shampoo carpets. During a confidential interview, it was indicated dark spots on the carpet had been present for over a year and a half. Review of Resident Council meeting minutes for May, June, and July 2025 indicated concerns regarding the frequency and thoroughness of room cleaning and/or floor cleaning. During an environmental tour of the facility on 8/6/25 from 11:36 a.m. to 12:12 p.m., the following concerns regarding clean and stain-free carpets were observed: The Theater Room common activity room carpeting had approximately 11 dark brown quarter-sized marks in the center of the room. The 200 hallway had brown carpeting over the entire hall. The hallway had grayish discoloration to carpeting at the threshold area of the majority of the resident room doorways. The hallway carpeting outside of room [ROOM NUMBER] had a white- yellowish mark approximately the 1/2 inch by 1/2 inch in size. The hallway carpet outside room [ROOM NUMBER] had a dark brown smudgy mark approximately 3 inches by 2 inches. Unoccupied resident room [ROOM NUMBER]'s carpet located outside the bathroom door had a brownish gray discolored area about 2 feet by 2 feet. Unoccupied resident room [ROOM NUMBER]'s carpet in front of the armoire had a dark brown spot with a spill-like pattern approximately 1 foot by 2 foot. In the middle of the room, there was another dark brown spot about 4 inches by 4 inches in size. In the center of the 200 hallway between rooms [ROOM NUMBERS], the carpet had a dark brown spot approximately 3 inches by 3 feet. Throughout the 200 hallway the carpet had random dark brown colored quarter-sized spots. The hallway carpet outside room [ROOM NUMBER] had a one foot by one foot splatter-like dark brown mark. The hallway carpet outside room [ROOM NUMBER] had a one foot by one foot dark mark. The hallway carpet outside the 200 shower room threshold area had a gray discolored area which extended from the door to about two feet out. The hallway outside room [ROOM NUMBER] had a 1 foot by two-foot spill-like dark mark. Unoccupied resident room [ROOM NUMBER]'s carpeting had 3 feet by 6 feet splotchy discoloration in the center of the room. Unoccupied resident room [ROOM NUMBER]'s carpeting had a one foot by two feet dark spot in the center of the room and beside the bed had a dark brown smudge-looking three feet by one foot mark. The hallway carpet in the middle of hall between room [ROOM NUMBER] and 202 had one foot by 2 feet oily-looking dark mark. Unoccupied resident room [ROOM NUMBER]'s carpeting had a three feet by five feet dark mark, just inside door. The rest of the carpet had splotchy discoloration throughout the room. Resident room [ROOM NUMBER]'s carpeting in front of recliner had a two foot by one foot dark mark. Unoccupied resident room [ROOM NUMBER]'s carpeting had a four foot by three foot dark mark in center of room and small spots throughout. The Entrance Lobby/Lounge, 200 Nursing Station, and hallway leading from these areas to the 100 Hall/Secured Unit, Main Dining Room and Therapy room also had brown carpet with random discoloration. The Entrance Lobby/Lounge had a one foot by one foot dark brown mark on the carpet in front of the TV and there were multiple small dark spots in front of the chair. The hallway carpet outside the Administrator's office had a one foot by two foot dark brown spill like mark. The 200 Hall Nursing Station carpet had a two foot by three foot dark brown spot. The hallway carpet outside the Employee Entrance Service Corridor door had a two foot by one foot dark brown mark and three inch by one inch dark mark. The Therapy room carpet had a two foot by two foot dark brown mark in the center of the room. The 100 Hall/Secured Dementia Unit had a lighter brown flecked carpet throughout the hallway and in resident rooms. The hallway carpet outside room [ROOM NUMBER] had a one foot by two foot discolored area. The hallway carpet outside the Treatment Room had a one foot by one foot dark brown spot. Unoccupied resident room [ROOM NUMBER]'s carpet had a two foot by three-foot light gray mark in the center of the room. The hallway carpeting outside room [ROOM NUMBER] had a four inch by three inch		