

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  155570	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  06/06/2025
NAME OF PROVIDER OR SUPPLIER  Majestic Care of McCordsville		STREET ADDRESS, CITY, STATE, ZIP CODE  7476 W Lane Rd McCordsville, IN 46055	

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)
<p>F 0676</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.</p> <p>Based on observation, interview, and record review, the facility failed to assist a resident with hearing aid placement for 1 of 1 resident reviewed for hearing (Resident 9).</p> <p>Findings include:</p> <p>During an observation and interview with Resident 9 on 6/3/25 at 11:23 a.m., the resident did not have hearing aids in place. Resident 9 indicated she could not hear the conversation and needed her hearing aids.</p> <p>During an observation on 6/4/25 at 10:32 a.m., Resident 9 did not have hearing aids in place.</p> <p>During an observation and interview with Resident 9 on 6/5/25 at 11:33 a.m., the resident did not have hearing aids in place. Resident 9 indicated she could not hear the conversation and needed her hearing aids.</p> <p>During an interview with the Director of Nursing (DON) on 6/5/25 at 1:52 p.m., she indicated the nurse was responsible for ensuring Resident 9's hearing aids were in place. The DON indicated if the resident refused to wear the hearing aids, then the nurse would document the refusal.</p> <p>During an interview with the DON on 6/6/25 at 11:15 a.m., she indicated she was unable to find documentation that Resident 9 had refused to wear her hearing aids.</p> <p>The clinical record of Resident 9 was reviewed on 6/6/25 at 11:30 a.m. The diagnoses included, but were not limited to, schizophrenia, hypertension, anxiety, age related physical debility, and vascular dementia.</p> <p>The plan of care for Resident 9, dated 2/12/24, indicated the resident had difficulty with communication due to a hearing deficit and had hearing aids. The interventions included, but were not limited to, assistance with hearing aid placement every day and remove at bedtime and ensure hearing aids were in place, working, and in good repair every day.</p> <p>A Quarterly Minimum Data Set (MDS) assessment for Resident 9, dated 5/28/25, indicated the resident was cognitively intact for daily decision making.</p> <p>(continued on next page)</p>

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
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<p>F 0676</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>The Activities of Daily Living (ADL) policy provided by the Administrator, on 6/6/25 at 9:44 a.m., indicated care and services would be provided for ADL's, included, but were not limited to, assistance with functional communication systems. The facility would maintain individual objectives of the plan of care.</p> <p>3.1-38(a)(2)(E)</p>		

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<p>F 0791</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide or obtain dental services for each resident.</p> <p>Based on observation, interview, and record review, the facility failed to follow up with dental recommendations for 1 of 3 residents reviewed for dental status and services. (Resident 4)</p> <p>Findings include:</p> <p>The clinical record for Resident 4 was reviewed on 6/3/25 at 10:35 a.m. Her diagnoses included, but were not limited to, anxiety, depression, atrial fibrillation, hypertension, and heart failure.</p> <p>The 4/8/25 Quarterly MDS (Minimum Data Set) assessment indicated she was cognitively intact.</p> <p>An interview was conducted with Resident 4 in her room on 6/3/25 at 10:37 a.m. She opened her mouth, pointed to a front, bottom tooth and indicated the tooth needed to come out. She saw a dentist about a year ago, and they were supposed to take it out, but never did.</p> <p>The 1/17/23 physician's order indicated she may be seen by the dentist.</p> <p>The 6/26/23 dental care plan, last revised 1/10/25, indicated she had oral/dental health problems due to some missing teeth. The goal was for her to be free of chewing problems, infection, pain, and/or bleeding in the oral cavity. An intervention was to coordinate arrangements for dental care and transportation as needed/ordered.</p> <p>The 10/13/23 dental note indicated she had natural dentition with root tips and fractures noted. Recommendations for follow-up were exams and cleanings with up to three hygiene visits during the next six months. The first visit to be completed within ninety days.</p> <p>There was no information in the clinical record to indicate any follow-up exams or cleanings were done during the six months following her 10/13/23 dental visit.</p> <p>An interview was conducted with the SSD (Social Services Director) on 6/4/25 at 2:00 p.m. She indicated she spoke with their dental provider and was informed Resident 4's insurance was canceled, but she was now eligible to be seen again, so the provider would be sending a new consent form for her to be seen at their next visit. She was unsure what happened, but they were taking care of it.</p> <p>On 6/5/25 at 10:23 a.m., the NC (Nurse Consultant) provided the 5/15/24 dental note from an outside provider. It indicated the recommended and discussed course of treatment was for extraction of three teeth. The treatment plan was presented by the business assistant and signed by Resident 4. The next visit was for extractions after medication consultation.</p> <p>The 5/15/24 social services note, written by the SSD as a late entry, indicated Resident went to an outside dentist today. The treatment plan includes the extraction of 3 teeth (1 broken and 2 loose). However, the resident only wants the broken tooth out. She states that she will let the 2 loose teeth fall out on their own. She was educated on the need to extract but still wanted only the broken tooth out. Dentist will call and schedule appointment for the procedure.</p> <p>There was no information in the clinical record to indicate follow-up with the dentist after the 5/15/24 teeth extraction recommendations.</p> <p>(continued on next page)</p>		

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<p>F 0791</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>An interview was conducted with the Practice Manager of the outside dental provider, who saw Resident 4 on 5/15/24. She indicated they never heard back from Resident 4's physician after they sent out a medical clearance form for contraindications to hold blood thinner medication for the extractions. They sent the form three times but never got a response from the physician. The facility also never reached out to them after Resident 4's 5/15/24 appointment.</p> <p>An interview was conducted with the Administrator on 6/5/25 at 10:42 a.m. She indicated Resident 4 did not want to follow through with the extractions recommended at her 5/15/24 appointment, because she thought it would ruin her appearance.</p> <p>An interview was conducted with LPN (Licensed Practical Nurse) 2 on 6/5/25 at 10:44 a.m. She indicated at least six months ago, Resident 4 informed her that her teeth did not bother her anymore and didn't want them extracted. Usually, when residents return from outside appointments with recommendations, LPN 4 moved forward with the recommendation, made a note about it, and scheduled, but she did not make a note about this particular recommendation.</p> <p>An interview was conducted with Resident 4 on 6/5/25 at 11:15 a.m. She indicated she never refused to have her tooth extracted. She always wanted it out and still did.</p> <p>The Dental Services policy was provided by the Administrator on 6/6/25 at 11:38 a.m. It indicated, It is the policy of this facility to assist residents in obtaining routine (to the extent covered under the State plan) and emergency dental care Oral care and denture care shall be provided in accordance with identified needs and as specified in the plan of care The facility will, if necessary or requested, assist the resident with making dental appointments and arranging transportation to and from the dental services location All actions and information regarding dental services, including any delays related to obtaining dental services, will be documented in the resident's medical record.</p> <p>3.1-24(a)(1)</p> <p>3.1-24(a)(2)</p> <p>3.1-24(b)</p>		