

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155833	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/01/2024
NAME OF PROVIDER OR SUPPLIER Wellbrooke of Carmel		STREET ADDRESS, CITY, STATE, ZIP CODE 12315 Pennsylvania Street Carmel, IN 46032	

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 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Protect each resident from the wrongful use of the resident's belongings or money.</p> <p>32842</p> <p>Based on observation, interview and record review, the facility failed to ensure a resident's credit card was kept safe and secure during her admission for 1 of 3 residents reviewed for misappropriation of property. (Resident B) The deficient practice was corrected on 7/18/24, prior to the start of the survey, and therefore was past noncompliance.</p> <p>Finding includes:</p> <p>A document, titled Indiana State Department of Health Survey Report System, dated 7/18/24, indicated Resident B reported missing a credit card which had charges on it she was not responsible for. The card was deactivated. The local police were notified, and an investigation was started. A staff member was terminated for stealing Resident B's credit card.</p> <p>The clinical record for Resident B was reviewed on 8/1/24 at 10:13 a.m. The diagnoses included, but were not limited to, chronic kidney disease stage 3, dependence on dialysis, hypertension, type II diabetes mellitus, and personal history of thrombus and embolism.</p> <p>The employee record for Housekeeper 1 was reviewed, on 8/1/24 at 11:45 a.m. The record included, but were not limited to, the following documents:</p> <p>a. An Indiana State Police screening report indicated Housekeeper 1's information provided inclusive results, and it was recommended to obtain her fingerprints.</p> <p>b. A document, titled Personal Action Form, dated 7/16/24, indicated Housekeeper 1 was suspended on 7/15/24, due to being involved in a theft investigation. She left on her lunch break and never returned.</p> <p>c. A document, titled Personal Action Form, dated 7/18/24, indicated Housekeeper 1 was terminated from the facility, on 7/18/24, for quitting without notice and no call no show. The comment section indicated Housekeeper 1 was involved in a theft investigation. She was asked to give her statement. On 7/15/24, she left for her lunch break and never returned. She did not answer calls or respond to texts from the facility. She was a no call no show for her 7/16/24 and 7/17/24 shifts with no response to her supervisor or the Executive Director (ED). The police were investigating the theft of Resident B's credit card.</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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>The facility investigation of Resident B's credit card included, but were not limited to, the following documents:</p> <p>a. A document, titled Investigation Summary, indicated on 7/13/24 at 5:00 p.m., Resident B reported her credit card was missing with charges she was not responsible for. The resident indicated her credit card was in her phone case wallet at approximately 9:00 a.m. She left her room around 10:00 a.m., to go do an activity, then went to physical therapy in the gym then to lunch at approximately 12:50 p.m. After the resident returned to her room, she picked up her phone case wallet and noticed her credit card was not in her wallet. She called her bank and reported the credit card missing. She found the credit card had an unknown transaction at a McDonald's at 12:30 p.m. The card was deactivated, and she reported the stolen credit card to the nurse on duty. Her credit card came up missing between the timeframe of 10:00 a.m. and 1:40 p.m., on 7/13/24.</p> <p>b. A typed statement by Housekeeper 3, dated 7/16/24, indicated she was training Housekeeper 1 on 7/13/24. Housekeeper 3 asked Housekeeper 1 if she needed a break and she indicated Yes, so they left and went on a lunch break. Housekeeper 1 mentioned to Housekeeper 3 she was going to her car, and she would be back. When Housekeeper 3 went to the employee break room to grab her iPad, she observed Housekeeper 1 eating McDonalds. Housekeeper 1 told Housekeeper 3 her husband had gotten her some food to eat for lunch. Housekeeper 1 disappeared randomly at approximately 2:00 p.m.</p> <p>During an interview, on 8/1/24 at 11:00 a.m., Resident B was observed sitting in her standard wheelchair in the therapy room. She indicated she had opened her phone wallet case where her credit card was kept prior to getting her morning care and her credit card was there. She received her morning care at approximately 9:00 a.m., then went to an activity at approximately 10:00 a.m. She went straight to therapy from the activity, then went to lunch and went back to her apartment at approximately 12:50 p.m. She opened her phone wallet case to look for something and noticed her credit card was missing. She called the bank and deactivated her credit card. At that time, she found out her credit card had been used at a McDonalds to buy food for \$10.50 at approximately 12:30 p.m. The person who stole it had also tried to use it at a store and it was denied three times due to the card being deactivated. She reported to a nurse her credit card had been stolen. The Executive Director (ED) told her a housekeeper was the staff member who stole her credit card. She received her \$10.50 back from the bank. The police officers were investigating the theft.</p> <p>A current policy, titled Abuse and Neglect Procedural Guidelines, dated as revised July 2, 2024, and provided by ED on 8/1/24 at 11:11 a.m., indicated .has implemented processes in an effort to provide a comfortable and safe environment .Definitions .Misappropriation of Property-means the deliberate misplacement, exploitation or wrongful, temporary, or permanent use of a resident's belongings or money without the resident's consent</p> <p>The deficient practice was corrected by 7/18/24, after the facility implemented a systemic plan which included a thorough investigation with police involvement, all alert and oriented residents were interviewed, Housekeeper 1 was terminated, and all staff members were educated on abuse and misappropriation of property along with resident rights.</p> <p>This citation relates to Complaint IN00438719.</p> <p>3.1-28(a)</p>		