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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 265105 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 04/29/2024 |
| NAME OF PROVIDER OR SUPPLIER Delmar Gardens West | | STREET ADDRESS, CITY, STATE, ZIP CODE 13550 South Outer 40 Road Town and Country, MO 63017 | |

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) |
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| <p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 34926</p> <p>Based on observation, interview and record review, the facility failed to provide a homelike environment by failing to ensure three sampled residents on the 100 unit had sufficient hot water for at least three months (Residents #1, #4 and #6). This had the potential to affect all 17 residents who resided on the 100 unit. The census was 185.</p> <p>1. Review of Resident #1's admission Face Sheet showed the resident was admitted to the facility on [DATE] with diagnoses that included major depressive disorder, generalized anxiety disorder and pain in right hip due to osteonecrosis (occurs when part of the bone does not get blood flow and dies).</p> <p>Review of the resident's admission Minimum Data Set (MDS), a federally mandated assessment instrument completed by facility staff, dated 8/18/23, showed:</p> <ul style="list-style-type: none"> -Cognitively intact; -Able to make self understood; -Able to understand others. <p>During an interview on 4/24/24 at 11:50 A.M., the resident, with his/her family member on the phone, said:</p> <ul style="list-style-type: none"> -There had been an issue with the water heater since he/she had been admitted ; -There had been no hot water in the seven months he/she had been in the facility; -The lack of hot water had limited the resident's ability to shower; -The resident would clean himself/herself up in the bathroom sink most days; -He/She was able to shower independently but did not get showers due to water being too cold for a shower. <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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Observation on 4/25/24 at 11:28 A.M., showed the water temperature at the handwashing sink in the resident's room, was 86 degrees Fahrenheit (F), after the water was allowed to run for two minutes in that room.</p> <p>Observation on 4/29/24 at 10:13 A.M., showed the water temperature at the handwashing sink in the resident's room, was 97 degrees F, after the water was allowed to run for four minutes in that room.</p> <p>2. Review of Resident #4's admission Face Sheet, showed the resident was admitted to the facility on [DATE] with diagnoses that included epilepsy (a disorder in which nerve cell activity in the brain is disturbed, causing seizures), left sided hemiplegia (paralysis of one side of the body) and hemiparesis (weakness or the inability to move on one side of the body), and cognitive communication deficit (difficulty with thinking and how someone uses language).</p> <p>Observation on 4/29/24 at 2:40 P.M., showed the water temperature at the handwashing sink in the resident's room, was 98 degrees F, after the water was allowed to run for two and a half minutes in that room.</p> <p>3. Review of Resident #6's admission Face Sheet, showed the resident was admitted to the facility on [DATE] with diagnoses that included generalized anxiety disorder and cognitive communication deficit.</p> <p>Observation on 4/29/24 at 2:45 P.M., showed the water temperature at the handwashing sink in the resident's room, was 90 degrees F, after the water was allowed to run for four minutes in that room.</p> <p>4. Review of the facility's 100 Unit Weekly Water Temperature Log, dated February 2024, showed:</p> <p>-Week one, 2/7/24:</p> <p>--room [ROOM NUMBER], temperature 111 degrees F;</p> <p>--room [ROOM NUMBER], temperature 102 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 101 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>-Week two, 2/14/24:</p> <p>--room [ROOM NUMBER], temperature 99 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 98 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 106 degrees F;</p> <p>-Week three, 2/21/24:</p> <p>(continued on next page)</p> | | |

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| <p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>--room [ROOM NUMBER], temperature 106 degrees F;</p> <p>--room [ROOM NUMBER], temperature 96 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 104 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>-Week four, 2/28/24:</p> <p>--room [ROOM NUMBER], temperature 101 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 104 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 106 degrees F.</p> <p>Review of the facility's 100 Unit Weekly Water Temperature Log, dated March 2024, showed:</p> <p>-Week one, 3/6/24:</p> <p>--room [ROOM NUMBER], temperature 90 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 105 degrees F;</p> <p>--room [ROOM NUMBER], temperature 108 degrees F;</p> <p>-Week two, 3/13/24:</p> <p>--room [ROOM NUMBER], temperature 103 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 89 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 100 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>-Week three, 3/20/24:</p> <p>--room [ROOM NUMBER], temperature 96 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 105 degrees F;</p> <p>--room [ROOM NUMBER], temperature 110 degrees F;</p> <p>(continued on next page)</p> |

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| <p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>-Week four, 3/27/24:</p> <p>--room [ROOM NUMBER], temperature 111 degrees F;</p> <p>--room [ROOM NUMBER], temperature 100 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 101 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F.</p> <p>Review of the facility's 100 Unit Weekly Water Temperature Log, dated April 2024, showed:</p> <p>-Week one, 4/3/24:</p> <p>--room [ROOM NUMBER], temperature 105 degrees F;</p> <p>--room [ROOM NUMBER], temperature 102 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 99 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>-Week two, 4/10/24:</p> <p>--room [ROOM NUMBER], temperature 112 degrees F;</p> <p>--room [ROOM NUMBER], temperature 100 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 106 degrees F;</p> <p>-Week three, 4/17/24:</p> <p>--room [ROOM NUMBER], temperature 103 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 101 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 98 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>-Week four, 4/25/24:</p> <p>--room [ROOM NUMBER], temperature 100 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>(continued on next page)</p> | | |

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| <p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>--room [ROOM NUMBER], temperature 86 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F;</p> <p>--room [ROOM NUMBER], temperature 78 degrees F, indicating the water temperature was below the standard 105 degrees F to 120 degrees F.</p> <p>5. During an interview on 4/29/24 at 1:54 P.M., the Maintenance Director said:</p> <p>-He/She was the one who did the temperature testing of the water;</p> <p>-Water temperatures should be between 105 degrees F and 120 degrees F after running the water for two minutes;</p> <p>-There had been issues with water temperatures on the 100 division being low for a while now, but only on the 100 division;</p> <p>-It is not acceptable for the residents to go without hot water for so long;</p> <p>-No residents had complained of low water temperatures to him/her personally, but staff had complained to him/her about it;</p> <p>-The facility had plumbers come out in February for a couple of weeks to try and figure out the problem and spent thousands of dollars on it and still no definitive answers on what the problem it;</p> <p>-He/she had changed all the shower heads on the 100 unit and that did not fix the problem;</p> <p>-He/she is in the process of changing out all the balancing spools also. They only had 10 in stock and had to order the rest.</p> <p>MO00234143</p> | | |

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| <p>F 0740</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Ensure each resident must receive and the facility must provide necessary behavioral health care and services.</p> <p>37672</p> <p>Based on observation, interview and record review, the facility failed to ensure a resident who was issued a 30-day discharge and known to be homeless, with a diagnosis of major depression, did not receive access to behavioral health services as an option to process emotional stressors (Resident #1). The census was 185.</p> <p>Review of the trauma informed care and behavioral health management policy, revised 9/2022, showed:</p> <ul style="list-style-type: none"> -Purpose: the facility will treat all residents with love, care and understanding. The facility believes all behaviors have meaning and is often a way of communication of a need. Assist in the early identification of residents past traumatic events/behaviors and to develop and implement interventions to manage or deescalate those behaviors. The community provides behavioral health services to residents requiring such services; -Definition: Behavioral health: a state of mental/emotional being and /or choices and actions that affect wellness; -Procedure: -Notification and necessary referrals will be sent to the resident's physician and/or psychiatrist; -Resident identified with or a history of trauma related disorders will have non-pharmacological interventions implemented; -The resident and/or resident representative are active participants in identifying triggers for behaviors and developing coping interventions; -Consult with psychiatry for additional interventions once medical and environmental reasons have been ruled out. <p>Review of the PHQ-2 assessment (used to determine the frequency of depressed mood), dated 11/13/23, showed:</p> <ul style="list-style-type: none"> -Should the resident mood interview be conducted: yes; -Little interest or pleasure in doing things over the last two weeks: no; -Over the last two weeks, felt down, depressed or hopeless: no; -Over the last two weeks, have trouble falling or staying asleep or sleeping to much: no; -Over the last two weeks, been bothered by feeling tired or having little energy: no; <p>(continued on next page)</p> | | |

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| <p>F 0740</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>-Over the last two weeks, been bothered by overeating: no;</p> <p>-Over the last two weeks, feeling bad about self or that your a failure, let yourself or family down: no;</p> <p>-Over the last two weeks, have trouble concentrating on things, such as reading the paper or watching TV: no;</p> <p>-Over the last two weeks, been bothered by moving or speaking slowly that others have noticed or being fidgety or restless and moving more than usual: no;</p> <p>-Over the last two weeks, been bothered by thoughts of being better off dead, or harming self: no;</p> <p>-Severity score: 0.</p> <p>Review of Resident #1's quarterly Minimum Data Set (MDS), a federally mandated assessment instrument completed by facility staff, dated 2/10/24, showed:</p> <p>-admitted : 8/11/23;</p> <p>-Able to make needs and wants known;</p> <p>-Does not refuse care, no mood problems;</p> <p>-Propels self in wheelchair;</p> <p>-Staff provide set up for care;</p> <p>-Diagnoses included heart disease, heart failure, anxiety, depression and lung disease;</p> <p>-Takes as needed pain medication;</p> <p>-Pain affects sleep occasionally;</p> <p>-Receives routine antidepressants and narcotic pain medication.</p> <p>Review of the resident's care plan, dated 2/22/24, showed:</p> <p>-Problem: Receives antidepressant medications related to depression;</p> <p>-Goal: Will not exhibit signs of drug related sedation;</p> <p>-Approach: assess/record effectiveness of the drug treatment, staff monitor and report changes. Monitor the resident's mood and response to medication.</p> <p>Review of the physician order sheet, showed an order, dated 4/16/24: Prozac (used to treat anxiety and depression) 20 milligram (mg). Take 40 mg once daily.</p> <p>(continued on next page)</p> |

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| <p>F 0740</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>During an interview on 4/24/24 at 11:50 A.M., the resident said he/she had lived at the facility since August 2023. He/She lived out in the community previously and admitted to the hospital for neck surgery. He/She had been notified in the hospital, he/she had become homeless and lost his/her apartment. He/She admitted to the facility for therapy services. He/She had a bill at the facility and was stressed on how to pay the bill. His/Her family did not agree with the billing, and he/she had been issued a 30-day discharge. He/She appealed the discharge and is awaiting the hearing. He/She was stressed and upset at the loss of his/her home, being discharged from the facility and additional stressors. He/She had anxiety and depression and took routine medication. The facility had not offered a therapist or counselor since his/her admission. He/She said he/she may like to speak to a counselor or therapist.</p> <p>During an interview on 4/24/24 at 1:50 P.M., the Compliance Officer (CO) said the resident admitted to the facility in August 2023. The resident had a diagnosis of depression and was notified in the hospital, he/she had been evicted from his/her apartment. The resident received routine medication for depression. The resident had been issued a 30-day discharge for failure to pay. The facility had offered different payment arrangements, the resident and family refused the alternative payment options. The resident had no orders for a psychiatric evaluation.</p> <p>During an observation and interview on 4/29/24 at 11:12 A.M., the resident was in his/her room. He/She appeared frustrated and stressed. The resident called his/her family and said he/she was anxious regarding scheduling orthopedic surgery. He/She was nervous about the upcoming discharge appeal hearing. The facility notified him/her of one other facility willing to accept him/her, but he/she did not want to move to that facility.</p> <p>During an interview on 4/29/24 at 12:30 P.M., the Social Worker (SW) said the resident admitted to the facility following neck surgery. The resident received therapy services. The resident is his/her own responsible party and the family is very involved in the resident's care. The resident has diagnoses of anxiety and depression and received routine medication. The resident had no history of trauma and staff had not reported any behaviors. The resident was issued a Notice of Medicare Non-Coverage (NOMNC) and the resident refused to apply for Medicaid. The resident had been evicted from his/her apartment during his/her hospital stay. The resident wanted to be discharged to the community and the SW offered contact information to long term stay hospitals. The resident became upset and told him/her that he/she would find a place to stay in the community himself/herself. The resident had been issued a 30-day discharge and appealed the discharge. The appeal hearing was upcoming. The resident had many stressors occurring. The SW conducted a cognitive assessment and depression assessment every 90 days. The resident has visitors frequently and attends physician appointments outside of the facility. Facility management had instructed the management staff to only speak with the resident with two management staff due to developing issues. The SW had not referred the resident to a counselor or therapist. She had backed off the resident. The resident had been accepted into other facilities, and she notified the facility management team of those facilities. She left the notification of acceptance to the facility management to tell the resident.</p> <p>During an interview on 4/29/24 at 2:21 P.M., the Admissions staff said he/she was present the day the resident came into the facility. He/She attempted to present and read the admission paperwork to the resident. The resident yelled at him/her and tore up the paperwork. He/She did not have any additional interaction with the resident. He/She had been told the resident had been evicted from his/her apartment while in the hospital. He/She did not know if the resident was seen by mental health services.</p> <p>(continued on next page)</p> | | |

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| <p>F 0740</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Review of the PHQ-2 assessment, dated 4/30/23, showed:</p> <ul style="list-style-type: none"> -Should the resident mood interview be conducted: yes; -Little interest or pleasure in doing things over the last two weeks: no; -Over the last two weeks, felt down, depressed or hopeless: yes; -How often bothered by this: 7-11 days; -Over the last two weeks, have trouble falling or staying asleep or sleeping to much: yes; -How often been bothered by this: 12-14 days; -Over the last two weeks, been bothered by feeling tired or having little energy: no; -Over the last two weeks, been bothered by poor appetite or overeating: yes; -How often have you been bothered by this: 2-6 days; -Over the last two weeks, feeling bad about self or that your a failure, let yourself or family down: no; -Over the last two weeks, have trouble concentrating on things, such as reading the paper or watching TV: no; -Over the last two weeks, been bothered by moving or speaking slowly that others have noticed or being fidgety or restless and moving more than usual: no; -Over the last two weeks, been bothered by thoughts of being better off dead, or harming self: no; -Severity score: 3; <p>-Minor depressive syndrome is suggested if of the 9 items, (1) feeling down, depressed or hopeless, (2) trouble falling or staying asleep, or sleeping too much or (3) feeling tired or having little energy are identified at the frequency of half or more of the days (7-11 days) during he assessment period;</p> <p>-The assessment is used to track changes in severity over time. The total score can be interpreted 1-4 minimal depression.</p> <p>MO00234143</p> | | |