

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 265160	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/11/2025
NAME OF PROVIDER OR SUPPLIER Lewis & Clark Gardens		STREET ADDRESS, CITY, STATE, ZIP CODE 1221 Boones Lick Road Saint Charles, MO 63301	
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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to ensure one resident (Resident #1), in a review of sampled residents, remained free from misappropriation of property when Certified Nurse Aide (CNA) A took the resident's government issued debit card without the resident's knowledge and permission and used the card to withdraw cash from several ATM's totaling \$864.00, used the card to pay Boost Mobile (a cell phone company) \$65.00, Spectrum for \$140.86, Ameren for \$100.00, and for doordash food totaling \$140.23. The facility census was 76</p> <p>On 4/11/25 at 3:00 P.M., the administrator was notified of the past noncompliance which occurred on 4/3/25. On 4/3/25, the administrator became aware of the violation of misappropriation of the resident's government issued debit card and monies taken from the account by CNA A. Upon discovery, the facility suspended CNA A, conducted an investigation, and notified appropriate parties. Staff reviewed the facility misappropriation policy, and all facility staff were educated on the facility misappropriation policy. CNA A was terminated. The deficiency was corrected on 4/7/25.</p> <p>Review of the undated facility policy for Abuse and Neglect showed:</p> <p>-It is the policy of this facility that each resident will be free from Abuse. Abuse can include misappropriation of resident property;</p> <p>-The Nursing Home Administrator or designee will report abuse to the state agency per State and Federal Requirements and law enforcement</p> <p>-It is the policy of this facility that reports of abuse are promptly and thoroughly investigated;</p> <p>-Investigation regarding misappropriation: the facility staff will complete an active search for missing items(s) including documentation of investigation. The investigation will consist of at least the following: a review of the completed complaint report; an interview with the person or persons reporting the incident; interviews with any witnesses to the incident; a review of the resident medical record if indicated; a search of the resident room with permission; an interview with staff members having contact with the resident during the relevant periods or shift of the alleged incident;</p> <p>-While the investigation is being conducted, accused individuals shall be immediately suspended and removed from contact with any residents.</p> <p>1. Review of Resident #1's face sheet showed the resident admitted to the facility on [DATE].</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 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of the admission Minimum Data Set (MDS) a federally mandated assessment instrument completed by staff, dated 3/12/25 showed the following:</p> <ul style="list-style-type: none"> -Able to make self understood and able to understand others; -Some difficulty making decisions; -Independent with Activities of Daily Living (ADL's). <p>During an interview on 4/11/25 at 10:00 A.M. the Administrator said the following:</p> <ul style="list-style-type: none"> -Resident #1 was newly admitted , his/her own person, and able to handle his/her own finances; -The resident had a government issued bank card that he/she used to purchase items out of the facility vending machine and pay bills; -At times he/she would give the card to the Activities Director to purchase cigarettes; -On 4/3/25, the resident went to the Business Office Manager (BOM) to see if she would help him/her with checking the balance on the debit card; he/she thought some money was missing; -With the resident's permission, the BOM set up an online account, checked the account balance, and noticed that several withdrawals were made from an ATM, several meals were purchased using door dash, and several utility bills had been paid; -The resident denied giving anyone permission to use his/her debit card; -Local law enforcement was notified and the resident filed a police report; -Officer A came to the facility and took the resident's statement; -Officer A came back to the facility and showed the resident footage from one of the ATM's used to withdraw money and the resident identified CNA A as the person using his/her debit card; -CNA A was placed on suspension pending the investigation per the instructions of the police officer, as he/she wanted to speak with CNA A first before the facility terminated the employee; -The Social Services Director and Director of Nursing began to interview residents to see if any other money was taken; -In-servicing for all staff on misappropriation of resident property began; -CNA A went out of town and was to return on April 5th and was supposed to meet with Officer A, but he/she did not show up to the meeting and came into work. He/she was informed that Officer A wanted to speak with him/her about some missing money, he/she said that Resident #1 gave him/her permission to use the debit card to purchase some food and pay a utility bill. <p>During an interview on 4/11/25 at 10:30 A.M. Resident #1 said the following:</p> <p>(continued on next page)</p>		

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<p>F 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>-On 3/31/25 ATM with drawl at a bank for \$604.00.</p> <p>During an interview on 4/11/25 at 3:00 P.M. the Administrator said the following:</p> <ul style="list-style-type: none"> -The debit card company has filed a claim and the resident should be receiving his/her money back; -CNA A has been terminated from employment from the facility; -In-servicing has began for all staff for misappropriation of resident property; -A meeting has been held with the resident council to discuss not giving staff their personal money or debit or credit cards. <p>MO252197</p>		