

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 265275	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/29/2025
NAME OF PROVIDER OR SUPPLIER Butler Rehab and Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 416 S High Street Butler, MO 64730	

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 0552</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure that residents are fully informed and understand their health status, care and treatments.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, contracted Physical Therapy Assistant (PTA) A did not adhere to resident's rights to be informed of care or refuse care by not explaining each treatment he/she was providing for seen residents prior to providing their treatments for seven residents (Residents #1, #2, #3, #4, #5, #6 and #7) causing those residents to feel uncomfortable with the PTA A's treatments out of eleven sampled residents. The facility census was 77 residents.</p> <p>On 4/29/25, the facility Administration was notified of the past noncompliance which occurred on 4/21/25. Facility staff were educated on resident rights, informed care, abuse and neglect protocols and customer service. The deficiency was corrected on 4/21/25.</p> <p>Review of the facility's Resident Rights-Quality of Life Policy revised on May 1, 2023 showed:</p> <ul style="list-style-type: none"> -The purpose of the policy was to ensure that all residents are treated with the level of dignity they are entitled to while residing at the facility. -Each resident was to have been cared for in a manner that promotes and enhances the quality of life, dignity, respect and individuality. -Facility staff was to always speak respectfully to residents, including addressing the resident by their name and pronoun of choice. -Facility staff was to have explained all procedures to residents before they were performed. -Demearing practices and standards of care that compromised dignity were prohibited. <p>1. Review of Resident #1's facility admission Record showed he/she was admitted on [DATE] with the following diagnoses:</p> <ul style="list-style-type: none"> -Non-traumatic intracerebral brain hemorrhage (also known as a brain bleed or hemorrhagic stroke, is a type of stroke where bleeding occurs within the brain tissue itself). -Generalized weakness. <p>Review of the resident's Physician Order Sheet (POS) dated 10/9/24 showed no order for Physical Therapy (PT).</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 0552</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of the resident's quarterly Minimum Data Set (MDS-a federally mandated assessment tool completed by facility staff and used for care planning) dated 4/4/25 showed he/she was cognitively intact.</p> <p>Review of the facility Investigation dated 4/14/25 showed:</p> <ul style="list-style-type: none"> -The resident reported that he/she saw contract PTA A walking another resident in the dining room and stated to the PTA that he/she would like to walk like that. -Contract PTA A offered to take him/her to the therapy gym to complete a therapy screen. -The resident agreed and went with contract PTA A to the therapy gym where PTA A completed a manual muscle test (a clinical assessment used to evaluate the strength of individual muscles or muscle groups) on his/her lower legs, hip flexion (the movement where the thigh is brought towards the chest at the hip joint), knee extension (the movement of straightening the knee joint) and knee flexion (the movement that bends the knee joint, decreasing the angle between the thigh and lower leg). -He/she also completed a sit to stand transfer. -After this was completed, he/she walked the resident down to his/her room. -The Contract PTA A reported that the resident got upset with him/her because he/she stated that since the resident was recently discharged off therapy services the resident would likely not be able to get back on therapy. -Once the resident returned to his/her room he/she sat on the bed and the contract PTA A continued the assessment by touching his/her legs, stomach, shoulders and back. -At no point during this time did resident feel uncomfortable. -The resident then reported that contract PTA A touched his/her chest area where resident alleged, he/she exposed his/her breast. -The resident stated that he/she told contract PTA A to leave his/her room so contract PTA A left. -This interaction was an unwitnessed event. <p>Resident #1 had discharged from the facility and was unable to be reached for interview after multiple attempts to contact.</p> <p>2. Review of Resident #2's facility admission Record showed he/she was admitted on [DATE] with the following diagnoses:</p> <ul style="list-style-type: none"> -Post surgical broken hip. -Generalized post-surgical weakness. <p>(continued on next page)</p>		

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<p>F 0552</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-He/she had spoken to his/her roommate, Resident #6 about what happened and his/her roommate said the same thing happened to Resident #6.</p> <p>-He/she felt creepy after the incident, and it made him/her nervous.</p> <p>-He/she did not say anything to any staff after it happened, until they asked him/her questions about contract PTA A.</p> <p>6. Review of Resident #6's facility admission Record showed he/she was re-admitted [DATE] with the following diagnoses:</p> <p>-Cervical spondylosis- (a degenerative condition that affects the bones and discs in the neck (cervical spine).</p> <p>-Generalized weakness.</p> <p>-Muscle wasting and atrophy- (both refer to the decrease in muscle mass and strength).</p> <p>Review of the resident's POS dated 11/27/24 showed PT was to evaluate and treat as indicated.</p> <p>Review of the resident's annual MDS dated [DATE] showed he/she was cognitively intact.</p> <p>Review of the facility's Investigation dated 4/15/25 showed:</p> <p>-Resident #6 was treated by contract PTA A over the previous weekend and stated he/she came into the residents' room asking if the resident wanted to walk down the hall.</p> <p>-The resident stated he/she sat down on the bed and contract PTA A rubbed his/her shoulders with contract PTA A's hand reaching down to his/her mid abdomen over his/her clothes.</p> <p>-The resident expressed discomfort and contract PTA A left.</p> <p>-The resident had not reported the incident to anyone, and a skin assessment showed no concerns.</p> <p>-The resident reported no pain and stated he/she felt safe and the facility staff had always treated him/her with dignity and respect.</p> <p>During an interview on 4/25/25 at 1:50 P.M., the resident showed:</p> <p>-About two to three weeks ago on a Saturday, contract PTA A came into his/her room and said, I am ready for you.</p> <p>-He/she asked the therapist what was going to happened and the therapist said he/she could give the resident a massage.</p> <p>-Contract PTA A then began to massage the resident's shoulders and while doing so, he/she moved his/her hands down towards the resident's right breast, not touching the breast, but getting close.</p> <p>(continued on next page)</p>		

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<p>F 0552</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-The resident knocked the therapist's hand away and said, what are you doing.</p> <p>-Contract PTA A just said he/she was giving a massage and the resident told him/her to stop and leave the room.</p> <p>-Contract PTA A lingered for a short time, watching the resident television near the foot of the bed and then left the room, saying nothing.</p> <p>-Contract PTA A had never treated the resident before that day and ha not treated him/her since.</p> <p>-The incident made him/her mad.</p> <p>7. Review of Resident #7's facility admission Record showed he/she was admitted on [DATE] with the following diagnoses:</p> <p>-Lumbar spondylosis with myelopathy.</p> <p>-Stroke.</p> <p>Review of the resident's POS dated 1/3/24 showed PT was to evaluate and treat.</p> <p>Review of the resident's quarterly MDS dated [DATE] showed he/she was cognitively intact.</p> <p>Review of the facility's Investigation dated 4/15 25 showed:</p> <p>-Resident #7 was spoken with initially on 4/14/25 and denied any issues. `</p> <p>-On 4/15/25 the resident then reported he/she wanted to inform the facility that a therapist with gray hair came into his/her room.</p> <p>-The resident stated he/she asked contract PTA A to rub his/her arm to which contract PTA A began rubbing his/her arm as requested.</p> <p>-The resident stated that at some point, contract PTA A then touched his/her right breast over his/her shirt.</p> <p>-Resident #7 told him/her to stop to which contract PTA A said he/she would not do that again.</p> <p>-The resident did not report the incident to anyone and also that he/she had provided therapy for the resident on the previous weekend and felt the therapist did a good job.</p> <p>-The resident expressed feeling safe in the facility and that facility staff had always treated him/her with dignity and respect.</p> <p>During an interview on 4/25/25 at 3:38 P.M., Resident #7 said:</p> <p>-Contract PTA A had treated the resident on 4/12/25 and he/she had no issues with the treatment.</p> <p>(continued on next page)</p>		

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