

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  265395	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/24/2024
NAME OF PROVIDER OR SUPPLIER  Maple Grove Wellness & Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE  560 Corisande Hills Road Fenton, MO 63026	

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 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide care and assistance to perform activities of daily living for any resident who is unable.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48247</b></p> <p>Based on observation, interview, and record review, the facility failed to provide a minimum of two showers per week for five residents (Residents #1 #2, #4, #5, and #6) out of six sampled residents. This deficient practice could potentially affect all residents. The facility's census was 92.</p> <p>Review of the facility policy titled, Showering a Resident, undated, showed a shower/bath is given to the residents to provide cleanliness, comfort and to prevent body odors. Residents are offered a shower at a minimum of once weekly and given per resident request.</p> <p>Review of the facility policy titled, Bed Baths, undated, showed a bed bath is given to residents to promote cleanliness and comfort and to stimulate circulation. Residents are given bed baths as scheduled.</p> <p>Review of the facility's Resident Council Meeting Minutes, dated, 06/26/24, showed resident complaints of showers were still not getting done twice a week.</p> <p>1. Review of Resident #1's medical record showed:</p> <ul style="list-style-type: none"> <li>- Diagnoses of supra ventricular tachycardia (SVT- an irregular rapid heartbeat), respiratory failure (lungs cannot get enough oxygen in the blood), depression (mood disorder), anxiety (feelings of fear, dread, uneasiness), poor urinary stream, and nicotine dependence;</li> <li>- Shower resident as needed (PRN);</li> <li>- No documentation of scheduled shower days each week.</li> </ul> <p>Review of the resident's quarterly Minimum Data Set (MDS - a federally mandated assessment to be completed by the facility), dated 05/10/24, showed:</p> <ul style="list-style-type: none"> <li>- Cognitive status intact;</li> <li>- Staff did more than half the effort for dressing, personal hygiene, and bathing.</li> </ul> <p>Review of the resident's shower sheets, dated 06/12/24 - 07/17/24, showed:</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 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>-For June 2024, the resident received showers on 06/19/24, and 06/26/24, with two out of four opportunities missed;</p> <p>-For July 2024, the resident received showers on 07/03/24, and 07/10/24, with three out of five opportunities missed.</p> <p>Observation on 07/18/24 at 11:30 A.M. showed the resident lay in bed with a body odor of sweat and unkempt hair.</p> <p>During an interview on 07/18/24 at 11:30 A.M., Resident #1 said he/she got a shower once or twice a month, not at least twice a week like he/she should, and that's when they changed his/her bed linens also. He/She needed assistance from staff for showering.</p> <p>2. Review of Resident #2's medical record showed:</p> <ul style="list-style-type: none"> <li>- Diagnoses of gastrostomy malfunction (difficulty with tube inserted into the stomach for nutritional feeding), protein calorie malnutrition (inadequate intake of protein, calories), convulsions (seizures), chronic obstructive pulmonary disease (COPD - damaged airways or other parts of the lungs blocking airflow), and exocrine pancreatic insufficiency (an inability to properly digest foods due to lack of/reduction of digestive enzymes made by pancreas);</li> <li>- Shower resident PRN;</li> <li>- No documentation of scheduled shower days each week.</li> </ul> <p>Review of the resident's annual MDS, dated [DATE], showed:</p> <ul style="list-style-type: none"> <li>- Cognitive status severely impaired;</li> <li>- Partial to moderate assistance of one staff for dressing, personal hygiene, and bathing.</li> </ul> <p>Review of the resident's shower sheets, dated 06/12/24 - 07/18/24, showed:</p> <ul style="list-style-type: none"> <li>-For June 2024, the resident received a shower on 06/28/24, with four out of five opportunities missed;</li> <li>-For July 2024, the resident received a shower on 07/12/24, with four out of five opportunities missed.</li> </ul> <p>Observation on 07/18/24 at 10:15 A.M. showed the resident sat up in bed and worked with occupational therapy. The resident had greasy, unkempt hair and dirty sheets on the bed.</p> <p>During an interview on 07/18/24 at 10:20 A.M., Resident #2 said he/she did not get showers at least twice a week like he/she was supposed to. He/She wiped himself/herself off because staff say they will give him/her a shower but they never do. He/She needed assistance from staff for showering.</p> <p>3. Review of Resident #4's medical record showed:</p> <p>(continued on next page)</p>		

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<p>F 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>- Diagnoses of high blood pressure, diabetes (a condition that affects the way the body processes blood sugar), hemiplegia (muscle weakness or partial paralysis on one side), pneumonia, stroke, and renal failure requiring dialysis;</p> <p>- Shower resident PRN;</p> <p>- No documentation of scheduled shower days each week.</p> <p>Review of the resident's quarterly MDS, dated [DATE], showed:</p> <p>- Cognitive status moderately impaired;</p> <p>- Dependent on staff for dressing;</p> <p>- Substantial/maximal on staff for personal hygiene;</p> <p>- Dependent on staff for bathing.</p> <p>Review of the resident's shower sheets, dated 06/12/24 - 07/18/24, showed:</p> <p>- For June 2024, the resident received a shower on 06/13/24, with four out of five opportunities missed;</p> <p>- For July 2024, the resident received a shower on 07/02/24, with four out of five opportunities missed.</p> <p>Observation on 07/18/24 at 12:00 P.M. showed the resident sat at the dining room table and waited for lunch with other residents. He/She had a musky body odor and greasy hair.</p> <p>During an interview on 07/18/24 at 12:00 P.M., Resident #4 said he/she did not get a shower at least twice a week as per his/her preference. He/She got one shower every two to three weeks. He/She had asked staff to shower him/her but they won't come back like they say or give him/her excuses as to why they can't. He/She needed assistance from staff for showering.</p> <p>4. Review of Resident #5's medical record showed:</p> <p>- Diagnoses of COPD, cirrhosis (chronic liver damage), Hepatitis C (viral liver infection), depression, and fusion of the cervical spine;</p> <p>- Shower resident PRN;</p> <p>- No documentation of scheduled shower days each week.</p> <p>Review of the resident's quarterly MDS, dated [DATE], showed:</p> <p>- Cognitive status intact;</p> <p>- Set up/clean up assistance from staff for dressing and personal hygiene;</p> <p>(continued on next page)</p>		

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<p>F 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>- Substantial/maximal assistance from staff for bathing.</p> <p>Review of the resident's shower sheets, dated 06/12/24 - 07/18/24, showed:</p> <p>- For June 2024, the resident received a shower on 06/10/24, with four out of five opportunities missed;</p> <p>- For July 2024, the resident received showers on 07/10/24, and 7/15/24, with three out of five opportunities missed.</p> <p>Observation on 07/18/24 at 12:00 P.M. showed the resident sat at the dining room table and waited for lunch with other residents. He/She had a musky body odor and greasy hair.</p> <p>During an interview on 07/18/24, at 12:01 P.M., Resident #5 said he/she was lucky if he/she got one shower every week instead of at least twice a week. He/She needed assistance from staff for showering.</p> <p>5. Review of Resident #6's medical record showed:</p> <p>- Diagnoses of respiratory failure, stroke, obesity, COPD, depression, hemiplegia, high blood pressure, and heart failure;</p> <p>- Shower resident PRN;</p> <p>- No documentation of scheduled shower days each week.</p> <p>Review of the resident's annual MDS, dated [DATE], showed:</p> <p>- Cognitive status intact;</p> <p>- Supervision/touching of one staff for dressing;</p> <p>- Supervision for personal hygiene;</p> <p>- Partial to moderate assistance of one staff for bathing.</p> <p>Review of the resident's shower sheets, dated 06/12/24 - 07/18/24, showed:</p> <p>- For June 2024, the resident did not receive a shower with five out of five opportunities missed;</p> <p>- For July 2024, the resident received showers on 07/8/24, and 07/12/24, with three out of five opportunities missed.</p> <p>Observation on 07/18/24 at 12:30 P.M. showed the resident lay in bed with his/her eyes closed with his/her hair greasy and unkempt.</p> <p>(continued on next page)</p>

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<p>F 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 07/18/24 at 12:15 P.M., Resident #7, who was also a family member and shared the room with Resident #6, said he/she needed assistance from staff for showering, did not get showered at least twice a week, and smelled bad. Resident #7 received showers due to he/she was independent with them and didn't have to rely on staff.</p> <p>During an interview on 07/18/24 at 4:00 P.M., the Administrator said she would expect showers to be given at least twice a week and refusals to be documented.</p> <p>Cmp #MO00238847</p>		