

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 265417	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/20/2024
NAME OF PROVIDER OR SUPPLIER Sherbrooke Village		STREET ADDRESS, CITY, STATE, ZIP CODE 4005 Ripa Avenue Saint Louis, MO 63125	

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 0837</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Establish a governing body that is legally responsible for establishing and implementing policies for managing and operating the facility and appoints a properly licensed administrator responsible for managing the facility.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 42247</p> <p>Based on interview and record review, the facility failed to have a licensed Administrator, who was legally responsible for establishing and implementing policies regarding the management and operation of the facility. This had the potential to affect all residents of the facility. The census was 128.</p> <p>The Interim Administrator was notified on [DATE] of the Past Non-Compliance. The Director of Business Operations (DBO) filed and received a Temporary Emergency License (TEL). The deficiency was corrected on [DATE].</p> <p>Review of Administrator A's State of Missouri Nursing Home Administrator's License showed it was valid through [DATE].</p> <p>Review of the DBO's cover letter for application of licensure/TEL application, dated [DATE], showed:</p> <p>-DBO had a previous TEL which was granted in [DATE];</p> <p>-The application was dated [DATE];</p> <p>-The receipt for Board of Nursing Home Administrators (BNHA) application for licensure was dated [DATE].</p> <p>Review of an email from the BNHA to the DBO, dated [DATE], showed, Our office is waiting on an employment update from Administrator A, are you working as the Administrator?</p> <p>Review of an email from the DBO to the BHNA, dated [DATE], showed, the DBO was not working as the Administrator. Administrator A was still on leave and was the Administrator of record. As his supervisor, the DBO was on site helping to support the community. The DBO asked to hold on processing the application at that time until the DBO knew the status of Administrator A's return.</p> <p>Review of an e-mail from the BNHA to the DBO, dated [DATE], showed, Attached are the letter and TEL for you to be the temporary Administrator of the facility effective [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 0837</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>The facility failed to have a licensed Administrator from [DATE] through [DATE].</p> <p>During an interview on [DATE] at approximately 3:30 P.M., the Interim Administrator said the DBO told him Administrator A's last day at the facility was [DATE]. The DBO said he applied for his TEL on [DATE].</p> <p>During an interview on [DATE] at 3:39 P.M., the DBO said he was aware Administrator A's license expired on [DATE] and that was one reason he filed for a TEL on [DATE]. The facility attempted to obtain a contracted Administrator, but that person backed out. That was what started the issue. Between [DATE] and [DATE], the DBO was on site and serving as the Administrator. Ideally, the facility should have a licensed Administrator.</p> <p>During an interview on [DATE] at 3:23 P.M., the Interim Administrator said he had been at the facility for four weeks. When he arrived at the facility the DBO's license was on the wall. He did not know who the Administrator was been [DATE] and [DATE]. He would expect for the facility to follow the regulation regarding having an Administrator.</p> <p>MO00238777</p>