STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	265434	A. Building B. Wing	03/13/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Riverview Nursing Center	10303 State Road C Mokane, MO 65059

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)
F 0602 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Protect each resident from the wrongful use of the resident's belongings or money. 27152 Based on record review and interview, facility staff failed to prevent the misappropriation of money from one resident's, out of four sampled residents, (Resident #1) checking account when Certified Nursing Aide (CNA) A stole checks from the resident, and had a third party cash the checks, without authorization of the resident. The facility census was 34. The administrator was notified on 3/13/24 of past Non-Compliance which occurred on 2/05/24. On 2/05/24, the administrator suspected CNA A used a resident's debit card to make multiple purchases from businesses, without the authorization of the resident. Upon discovery, staff suspended CNA A on 2/05/24. The facility conducted an investigation, in-serviced all staff on the facility's abuse, neglect, and misappropriation policies on 2/5/24, and terminated CNA A on 2/7/24 for violation of facility policy. 1. Review of the facility's Abuse, Neglect, and Misappropriation Policy, undated, showed the facility will assure all residents, responsible parties, and staff understand there is zero tolerance of verbal, sexual, physical, or mental abuse, corporal punishment, involuntary seclusion, neglect, or misappropriation of resident property by an employee or any other person known or unknown to the resident. Review showed misappropriation of resident property is defined as the deliberate misplacement, exploitation, or wrongful, temporary or permanent use of a resident's belongings or money without the resident's consent. 2. Review of Resident #1's Quarterly Minimum Data Set (MDS), a federally mandated assessment tool, dated 12/29/23, showed staff assessed the resident with impaired cognition. Review of the facility's investigation, dated 8/01/23, showed staff documented the resident's family member notified the Social Service Director (SSD), on 08/01/23, someone was writing bad checks from the resident's checking account. Review showed the facility contacted the Department of Health and Senior Services (DHSS), the local police department, and the local sheriff's department to report the incident. Reviewed showed the SSD documented the investigation did not identify any staff member involved in the incident at that time. Facility in-serviced all staff on the facility's abuse, neglect, and misappropriation policies on 8/2/24. (continued on next page)

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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0602 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Review of the local county sheriff's department incident report, dated 8/9/23 and reviewed on 3/18/24, showed on 2/1/24 the investigator documented the video from the local bank had been reviewed and showed CNA A and CNA A's spouse cashed checks through the drive-thru of the bank on 7/22/23. On 2/6/24 the investigator documented he/she contacted the facility and reported the stolen checks and inquired if CNA A worked there and was informed he/she had been terminated on 2/7/24. Review showed the investigator documented, during an interview on 2/27/24, at approximately 8:28 A.M., CNA A said he/she knew the resident was missing money, but he/she, thought it was the resident's sibling or guardian who was responsible, and he/she was the connection between his/her spouse and the facility. Review showed the investigator documented CNA A's spouse said he/she and CNA A wrote checks numerous times, and CNA A was aware of the checks being cashed, he/she saw the checks and took them, and he/she needed the money because he/she was broke. Review showed the deputy interviewed CNA A and CNA's spouse on 2/27/24. Review showed the local Sheriff's Department charged CNA A with Financial Exploitation of Elderly/Disabled Person, and Fraudulent Use of Credit/Debit Device, Stealing $750.00 or more on 2/27/24. Review showed the local Sheriff's Department charged CNA A's spouse with Forgery, Financial Exploitation of Elderly/Disabled Person, Fraudulent Use of Credit/Debit Device, Identity Theft or Attempt, Stealing $750. 00 or more, with the reporting person as the resident's guardian on 2/27/24. Review showed the local Sheriff's Department documented CNA A and CNA A's spouse misappropriated approximately $4,195.00 from the resident through cashed stolen/fraudulent checks. During an interview on 3/11/24 at 10:17 A.M. the administrator said he reported the arrest of CNA A and his/her spouse to DHSS on 2/28/24 in order to link the previous incident with CNA A. During an interview on 3/11/24, at 10:20 A.M., the Business Office Manager (BOM) said CNA A admitted to misappropriating the resident's funds, as well as stealing approximately $4000.00 from the facility. During an interview on 3/25/24 at 3:15 P.M., the administrator said they had not been notified by their local police and/or sheriff's department of the arrest of CNA A. He said a staff member in dietary watched the news and reported it to him. During an interview on 3/28/24 at 12:45 P.M., the Director of Nursing (DON) said the Social Services Director (SSD) had brought it to his/her attention that a resident had some checks stolen in 8/2023 but that at that time no one could be identified. He/She said when there was an allegation in February 2024 a resident had his/her debit card taken by CNA A and upon review it was found the resident had given the employee the card to use to get him/her items. After their investigation they let him/her go due to a policy violation. The maintenance supervisor who has affiliation with the local sheriff's department came in sometime after CNA A was terminated and said they had arrested CNA A and his/her spouse. During an interview on 3/28/24 at 1:06 P.M., the SSD said there was an employee from the bank who came in August, 2023 who was questioning Resident #1 about checks that had come through the bank to find out if the resident had approved them. The SSD said at that time no one had been identified and the investigation was ongoing. He/She said in February, 2024 there was a report of CNA A using a residents debit card but the resident had given him/her permission. The SSD said although he/she had permission everyone knows you don't do that and CNA A was terminated. MO00232513