STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	265534	A. Building B. Wing	05/15/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Heritage Care Center	4401 North Hanley Road Saint Louis, MO 63134

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 0586 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Not prohibit or in any way discourage a resident from communicating with federal, state, or local officials. Based on interview and record review, the facility failed to ensure residents were able to communicate freely with the State Survey Agency (SSA) when the facility's Social Service Director (SSD) and Administrator confronted one resident after the resident voiced concerns about calling the SSA hotline (Resident #15). The sample was 10. The census was 103. Review of the facility's Grievance policy, dated 12/27/24, showed the following:-Purpose: It is the policy of this facility to support each resident's and family member's right to voice grievances without discrimination, reprisal or fear of discrimination or reprisal;-Resident Right to File a Grievance: Every resident has the right to voice their grievance with the facility or other agency. Grievances could include care and treatment that was not provided, behavior or staff or other residents, or any other concerns regarding their stay. A grievance is a formal complaint, not a question or concern brought to a staff member or a call to the compliance hotline. Review of the facility's Resident Rights policy, dated 9/21/25, showed the following:-Purpose: To ensure that resident rights are protected;-Policy: In the case of Resident being adjudged incompetent by a court of competent jurisdiction, the rights of Resident are exercised by the person appointed under State law to act on Resident's behalf;-Resident Rights under Social Security Act: Resident has a right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside Facility. Review of Resident #15's quarterly Minimum Data Set (MDS), a federally mandated assessment instrument completed by facility staff, dated 4/30/26, showed the following:-No cognitive impairment;-No behaviors;-Independent with activities of daily living;-Diagnoses included high blood pressure, diabetes, anxiety disorder, depression, bipolar disorder (a mental health condition that causes extreme shifts in mood) and schizophrenia (a chronic brain disorder that causes people to interpret reality abnormally). Review of the resident's behavior notes, showed the following:-On 5/1/26 at 2:06 P.M., the Social Worker spoke with resident regarding phone calls made to SSA. The resident said that his/her peers asked him/her to call for them and he/she does not want to call for them anymore. The Social Worker and Administrator informed resident that he/she was not obligated to contact SSA for his/her peers, resident stated okay and he/she would not do it again;-On 5/6/26 at 10:09 A.M., the resident contacted SSA this morning with false allegations. The resident said someone did something to him/her. This writer contacted the resident's guardian to inform them of resident's actions. The resident's guardian said that resident contacted him/her and told him/her he/she called State, but resident did not say the reason for his/her call to the SSA. The guardian said he/she will speak with resident as to why he/she made the allegations. The Social Worker will also speak with resident. During an interview on 5/15/26 at 1:05 P.M., the resident said the Administrator and SSD spoke with him/her about calling the SSA hotline. When speaking with them, he/she felt threatened and was told he/she would be kicked out of the facility. During an interview on 5/15/26 at 1:20 P.M., Guardian A said he/she spoke with the resident on 5/6/26 about calling the SSA hotline. If the resident needed to call the SSA hotline, Guardian A would not have a problem with this. The resident had a right to express his/her concerns. During an interview on 5/15/26 at 2:40 P.M., the SSD and Administrator said the resident said he/she called the SSA hotline. The SSD said he/she was trying to find out why (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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F 0586 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	the resident called the SSA hotline so he/she could help the resident, not to intimidate the resident. The Administrator said any resident had the right to call the SSA hotline to file a report without intimidation or retaliation. The SSA said by asking why the resident called the hotline, he/she can see how it may have seemed like intimidation.