

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  265578	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  02/04/2025
NAME OF PROVIDER OR SUPPLIER  Normandy Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE  7301 St Charles Rock Rd Saint Louis, MO 63133	
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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46970</b></p> <p>Based on observation, interview and record review, the facility failed to provide a clean, comfortable, home-like environment when staff did not keep one resident's (Resident #5) shower clean and free of feces and failed to clean his/her bathroom, prior to the resident's bathroom being locked for service repair. The facility failed to maintain resident showers in good condition and/or repair by not having all sides of the shower wall finished (Resident #4) and failed to replace/repair the cove base that had separated from the wall of the shower in another resident's room (Resident #1). Additionally, the facility failed to keep clean the community bathroom and clean utility room sink on the 3rd floor. The sample size was 10. The census was 97.</p> <p>Review of the facility's essential functions of the Housekeeping Supervisor, revised 05/2022, showed:</p> <ul style="list-style-type: none"> <li>-The Housekeeping Supervisor will oversee and schedule a team responsible for creating a clean and comforting home for residents in long-term care. In addition to directing, training, and leading the team, the supervisor will also participate in environmental functions including:</li> <li>-Sweeping, mopping, and other floor care including spill clean-up and regular maintenance;</li> <li>-Dusting and general pick-up of common areas;</li> <li>-Arrange furniture and disinfect surfaces;</li> <li>-Launder linens for residents;</li> <li>-Prepare bedding;</li> <li>-Generally clean furniture, equipment, fixtures, and hardware;</li> <li>-Other duties as assigned.</li> </ul> <p>Review of the facility's essential functions of Housekeeping Assistant, reviewed 05/2022, showed:</p> <ul style="list-style-type: none"> <li>-Sweep and mop floors;</li> </ul> <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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-Clean furniture, equipment, fixtures, and hardware;</p> <p>-Other duties as assigned.</p> <p>Review of the facility's essential functions of the Maintenance Supervisor, revised 05/2022, showed:</p> <p>-Report to the Administrator regarding the physical and structural conditions of the center and the status of work in progress;</p> <p>-Coordinate the repair of equipment or recommend the replacement of or additions to equipment or center as necessary;</p> <p>-Negotiate priorities, plan work schedules, make job assignments, order needed materials, supplies and parts;</p> <p>-Schedule and supervise maintenance repair work, alterations, remodeling, minor construction;</p> <p>-Maintain an inventory of parts and supplies to maximize the operational readiness of hospital building systems and equipment with due respect to the limitations of cost, regulations, and relative priorities;</p> <p>-Responsible for developing the annual operating budget, which includes equipment, materials, and supply needs;</p> <p>-Other duties as assigned.</p> <p>Review of the facility's essential functions of a Certified Nurse Aide (CNA), revised 01/2024, showed:</p> <p>-Assures all infection control protocols are followed at all times;</p> <p>-Follows all company policies and procedures;</p> <p>-Other duties as assigned.</p> <p>1. Review of Resident #5's annual Minimum Data Set (MDS), a federally mandated assessment instrument completed by facility staff, dated 12/17/24, showed the following:</p> <p>-Severe cognitive impairment;</p> <p>-Diagnoses included anemia (lack of blood), renal insufficiency (a condition in which the kidneys lose the ability to remove waste and balance fluids), renal failure or end-stage renal disease (ESRD, a condition in which the kidneys lose the ability to remove waste and balance fluids) and stroke;</p> <p>-Functional limitation in range of motion: impairment on one side, both upper and lower extremity;</p> <p>(continued on next page)</p>		

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-Roll left and right (the ability to roll from lying on back to left and right side and return to lying on back on the bed): Supervision or touching assistance.</p> <p>Review of the resident's physician order, dated 4/30/24, showed an order for Lasix oral tablet 20 milligrams (mg), give 1 tablet by mouth 1 time a day related to hypertensive heart disease without heart failure.</p> <p>Observation of the resident's bathroom on 2/3/25 at 12:13 P.M., showed the door was locked. A formed dark colored substance/material (feces) and strings of hair inside of and to the left of the entrance of the shower and black/dark colored grout in between the dark and light gray shower tiles. The shower floor was wet inside.</p> <p>During an interview on 2/3/25 at 12:13 P.M., the resident the facility wouldn't fix the toilet, so they locked the door. Whenever he/she needed the bathroom, the resident said he/she had to use the bathroom in the common area on his/her floor. The resident said he/she went to the bathroom a lot and had had accidents because other people were in the bathroom when he/she needed to go. He/She wanted the bathroom in his/her room to work and didn't want to have to use bathrooms in other places. The resident said he/she was able to use his/her shower. He/She didn't know when or if housekeeping had cleaned it. The resident said he/she moved out once the bathroom toilet door was locked by maintenance for repair.</p> <p>During an interview on 2/3/25 at 12:53 P.M., the Maintenance Director said they were working on the toilet. The water constantly ran, and that was the only reason the bathroom had been locked. They were waiting for parts to come in. He said the bathroom had been locked for about a month. The water couldn't be shut off only in that room because the building system was old. The Maintenance Director expected the resident to have access to the toilet in his/her room but said there were other bathrooms on the floor the resident could use.</p> <p>The Maintenance Director could not provide documentation for any ordered parts or materials on order to repair the resident's toilet.</p> <p>During an interview on 2/4/25 at 10:06 A.M., the resident said he/she didn't like not being able to use the bathroom in his/her room. He/She said it bothered him/her because he/she had sudden urges to go the bathroom. He/She said it felt terrible to have to wait for other people to come out of the bathroom before he/she could go.</p> <p>Observation on 2/4/25 at 11:05 A.M., showed the resident's bathroom door unlocked, with feces behind the base of the toilet, dried brown substance/material splattered on the blue wall tile, and on the floor below it.</p> <p>During an interview on 2/4/25 at 10:07 A.M., Housekeeper B said he/she reported maintenance issues by completing a form and putting it in the mail slot for maintenance. The mail slot was downstairs. He/She said the main Housekeeper assigned to the floor was responsible to clean bathrooms, resident rooms, and common areas.</p> <p>(continued on next page)</p>		

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 2/4/25 at 12:21 P.M., the Maintenance Director said he had the parts to repair the resident's bathroom and he expected the bathroom to be fixed today and if not today, by the end of the week. He expected the resident to be able to use the toilet in his/her room. He said he didn't know the bathroom was soiled the way it was and said housekeeping was responsible to clean the bathroom. The Maintenance Director said he did visual walk throughs of resident rooms during the monthly bed inspections. The facility had an electronic system for maintenance concerns, but there were paper maintenance request forms available for staff and/or residents to use. He said there were mailboxes on each floor and near the maintenance office where the forms could be dropped in. He expected all equipment maintenance was responsible for to be in good working/functioning condition. He said they tried to promptly address maintenance concerns.</p> <p>During an interview on 2/4/25 at 1:30 P.M., the Administrator said she expected housekeeping to clean resident rooms and other assigned areas. She said the resident's bathroom had been locked because the water needed to be turned off to complete the work and the water was leaking down to the 1st floor. The work required a complete water shutoff and it had been too cold to do that. The Administrator thought the bathroom had only been locked a couple of weeks. She expected the bathroom to have been cleaned before it was locked but said the way it looked didn't happen in one day. She said the Housekeeping Supervisor told her about the bathroom today.</p> <p>2. Review of Resident #4's annual MDS, date 12/23/24, showed:</p> <p>-Cognitively intact:</p> <p>-No range of motion functional limitations upper or lower extremities;</p> <p>-Daily preference: very important to choose between a tub bath, shower, bed bath, or sponge bath;</p> <p>-Diagnoses included chronic obstructive pulmonary disease (COPD, a lung disease causing restricted airflow and breathing problems), anxiety disorder, depression.</p> <p>Observation of the resident's shower on 2/3/25 at 11:50 A.M., showed the shower had no finished shower walls. Torn brown cardboard and cardboard like material was on the shower wall and covered a different layer of the shower wall. On some areas of the wall there was torn white paperlike material on top of the torn brown cardboard material. There was a disconnected white shower hose on the shower floor. The floor tiles were a mixture of dark and light gray.</p> <p>During an interview on 2/3/25 at 11:50 A.M., the resident said his/her shower didn't work and the shower didn't have any finished walls. He/She was disgusted for having to live there. He/She didn't like using the community shower because there was no privacy and he/she was afraid of germs and of getting a disease. The resident said he/she was particular about taking showers and being clean.</p> <p>(continued on next page)</p>		

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 2/3/25 at 12:53 A.M., the Maintenance Director said the resident's shower floor had been re-done and they needed to put in the shower walls to complete the work. He said the shower had been down for about two months. They had other issues in the building and that's why it had taken so long to complete. The Maintenance Director said they were waiting for curtains, rings for the shower curtain and handles. He said the resident could use the main shower in the common area to take a shower. They ordered privacy curtains for that shower but none of the privacy curtains had been put up yet in the community shower on 3rd floor. He had some in the pack and some on order. The Maintenance Director said he expected the resident to have access to the shower in his/her room.</p> <p>The Maintenance Director could not provide documentation for any ordered shower room materials on order.</p> <p>During an interview on 2/4/25 at 12:21 P.M., the Maintenance Director said he had one of his maintenance workers working on the shower today. He said the material was here. He expected all equipment that maintenance was responsible for to be in good repair and properly functioning.</p> <p>During an interview on 2/4/25 at 1:30 P.M., the Administrator said she didn't know the resident's shower was still not completed. She thought it was finished. She expected the resident's bathroom shower to be finished.</p> <p>3. Review of Resident #1's admission MDS, dated [DATE], showed:</p> <ul style="list-style-type: none"> <li>-Severe cognitive impairment;</li> <li>-Daily preference: very important to choose between a tub bath, shower, bed bath, or sponge bath;</li> <li>-No range of motion functional limitations upper or lower extremities;</li> <li>-Asthma (condition in which a person's airway becomes inflamed, narrow, and swell, and produce extra mucus, which makes it hard to breath) and COPD.</li> </ul> <p>Observation on 2/4/25 at 10:12 A.M., showed the cove base separated from the base of the shower wall in the resident's room. He/She had a regular wooden high back chair with soft cushion inside of the shower being used as a shower chair. The resident said he/she used the chair for his/her showers.</p> <p>During an interview on 2/4/25 at 12:21 P.M., the Maintenance Director said he didn't know the cove base had fallen down in the resident's shower. He said the facility had the materials available to the cove base. He did monthly visual walk-through of rooms. He expected the resident's shower to be in good repair and working properly. They try to promptly address concerns.</p> <p>During an interview on 2/4/25 at 1:30 P.M., the Administrator said she didn't know the cove base in the resident's shower was in disrepair. She said she had seen some other places in the building before with that issue, so she had materials ordered. She knew who was assigned to work on the cove base. The Administrator, Director of Nursing (DON) and Assistant Director of Nursing (ADON) all said the facility had plenty of shower chairs and thought the resident had put the regular cushioned chair in his/her shower.</p> <p>(continued on next page)</p>		

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>4. Observation on 2/3/25 at 10:42 A.M., showed the bathroom across from/near room [ROOM NUMBER] had brown substance/material smeared on the toilet seat and no hand soap in the soap dispenser.</p> <p>Observations of the 3rd floor on 2/3/25 at 11:18 A.M., showed:</p> <ul style="list-style-type: none"> <li>-The clean utility room had sink without a faucet, contained dried trash, corn, and other debris;</li> <li>-A strong/offensive urine odor near the nurse station and room [ROOM NUMBER];</li> <li>-The common bathroom, across from room [ROOM NUMBER] had dark yellow colored urine and formed feces inside the toilet, with toilet seat raised. A very strong smell of ammonia filled the bathroom and an ammonia odor seeped into the hallway. There was no soap in the soap dispenser.</li> </ul> <p>During an interview on 2/3/25 at 11:26 A.M., Licensed Practical Nurse (LPN) A said whomever walked past the bathroom and observed it was dirty/soiled was responsible to flush the toilet and/or clean the bathroom. Observation showed he/she stood at/near/in front of the entrance of the open bathroom door and looked inside as he/she put his/her gloves on to go into the dirty bathroom.</p> <p>During an interview on 2/4/25 at 10:30 A.M., the Administrator said some of the residents do mean things to the third floor bathroom.</p> <p>5. During an interview on 2/4/25 at 11:54 A.M., the Housekeeping Supervisor said it was housekeeping's responsibility to clean the resident bathrooms and the bathrooms in the hallway. When housekeeping staff first come to work, they clean all the resident rooms and then the hallway bathrooms, and showers. Those are the areas with the most traffic. Nursing was supposed to clean up any feces and urine that was not in the toilet with a bucket that was stored in the soiled utility room. Nursing staff were then supposed to tell the housekeeper so they could clean and sanitize the area. The Housekeeping Supervisor expected staff to follow all the facility's daily, weekly, and monthly cleaning schedules.</p> <p>6. During an interview on 2/4/25 at 1:30 P.M., the Administrator said she expected housekeeping to clean resident rooms including showers and toilets and common areas. She expected staff to follow all of the facility's daily, weekly, and monthly cleaning schedules and maintenance to complete repairs timely and as needed and visually inspect resident rooms.</p> <p>MO00248497</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>46970</p> <p>Based on observation and interview, the facility failed to implement sanitary practices and conditions within the dietary department to prevent the potential for contamination of food during storage, preparation, and distribution when staff failed to keep the kitchen equipment and floors clean, free of dust, grease, and grime. Additionally, the facility failed to keep soap dispenser in the main kitchen filled. These deficient practices had the potential to affect all residents who consumed food from the facility's kitchen. The sample was 10. The census was 97.</p> <p>Review of the facility's Nutritional Service Sanitation policy, revised 11/21/24, showed:</p> <ul style="list-style-type: none"> <li>-Policy: Nutritional service shall ensure a clean and sanitary work environment; to promote and protect food safety; and, to maintain compliance with Federal, State, and Local regulations governing food sanitation and safety;</li> <li>-Responsibility: Dietary Aide, Dietary Cook, Registered Dietitian, and Dietary Manager;</li> <li>-Procedure:</li> <li>-Personnel shall be responsible for daily, weekly, and monthly cleaning assignment as determined by the dietary manager and/or his/her designee;</li> <li>-Cleaning assignments may include but not limit to dining room tables, equipment, cabinets, storage areas, walls, food service-related carts, and refrigeration units. Frequency of completion shall be in conjunction with food safety regulation and with consideration of manufacturer guidelines;</li> <li>-Cleaning of equipment condensers, lights, vents/fans, ceiling, ice machine, etc. shall be completed by the maintenance department as determined by the Administrator and in accordance to meet minimum standards of Federal, State, and Local guidelines and ordinances governing food service;</li> <li>-Equipment shall be cleaned, sanitized, delimed, etc. in accordance with manufacturer recommendations.</li> </ul> <p>Review of the facility's Daily Kitchen Checklist, (no date) showed:</p> <ul style="list-style-type: none"> <li>-Daily or after each use:</li> <li>-All dishes, pots, pans, and utensils are cleaned and stored properly after each meal and snack;</li> <li>-All work counters/tables are cleaned and sanitized after use, to include prep table/counter;</li> <li>-Steam table is cleaned and sanitized after each use;</li> <li>-Floors swept and mopped daily;</li> </ul> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>-One of two cabinet drawers connected to the steam table contained one can opener, one small black pair of tongs, and one long fork, along with old torn, stained paper and dried black grime and debris in the very back of the drawer.</p> <p>During an interview with [NAME] E and [NAME] F on 2/3/25 at 10:32 A.M., [NAME] E said the equipment was supposed to be cleaned daily and he/she thought at least two times a week. [NAME] F said the kitchen should be cleaned every two to three days and/or as needed. Both [NAME] E and [NAME] F said they didn't know the cabinet drawer was there and never used the drawers on the steam table before.</p> <p>2. Observation of the dish room on 2/3/25 at 10:18 A.M., showed the following:</p> <p>-Two white bait traps broken apart, small clear plastic bag, one wadded paper towel, soot and grime on the floor underneath the dishwasher/table;</p> <p>-Two small blue saucers filled with dried food and debris, one small black bowl, filled with dried food and debris, one small clear bowl, and one small clear four ounce cup on the floor in the corner of the kitchen. Additional food, trash, grime, and other debris visibly scattered on the floor in the same area as the dishes;</p> <p>-Green corrosion and brown splatters on the white wall just above the dishes and debris in the corner on the floor in the kitchen;</p> <p>-Missing ceiling tiles;</p> <p>-Large globs of black grime underneath the silver table in the kitchen near the wall and inside the floor grout.</p> <p>During an interview on 2/3/25 at 10:20 A.M., [NAME] E said everyone was responsible for cleaning the areas in the kitchen. He/She said whoever saw whatever was dirty, should clean it up. He/She said Dietary Aides were back in the dishwasher side of the kitchen most of the time.</p> <p>3. Observation of the kitchen on 2/3/25 at 10:12 A.M., showed the soap dispenser at the white handwashing sink, near the microwave, was empty.</p> <p>During an interview on 2/3/25, 10:12 A.M., Dietary Aide C said he/she guessed the soap dispensers were refilled by dietary but thought there was none.</p> <p>During an interview on 2/3/25, 10:12 A.M., Dietary Aide D said housekeeping was responsible to put soap in the soap dispensers. He/She said they checked every morning but guessed it slipped their minds today.</p> <p>During an interview on 2/4/25 at 11:54 A.M., the Housekeeping Supervisor said housekeeping was responsible for refilling all soap dispensers. He expected housekeeping staff to refill the soap dispensers.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>4. During an interview on 2/4/25 at 11:38 A.M., the Dietary Manager said the Dietary Aides and Cooks have a daily cleaning schedule. She expected them to follow the cleaning schedule every day. She said the kitchen equipment was supposed to be wiped down after each meal. Rubbish, debris or dishes should not have been on the floor in the corner or anywhere in the kitchen. She expected staff to follow the facility's Nutritional Sanitation policy.</p> <p>5. During an interview on 2/4/25 at 1:30 P.M., the Administrator said she expected the kitchen to be cleaned daily, weekly, monthly, and as need. She expected soap to be in all dispensers, and all dietary staff to follow the facility Nutritional Sanitation policy and kitchen cleaning schedules.</p> <p>MO00248497</p>

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NAME OF PROVIDER OR SUPPLIER  Normandy Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE  7301 St Charles Rock Rd Saint Louis, MO 63133	
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 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 46970</p> <p>Based on observation, interview and record review, the facility failed to maintain an effective pest control program by not ensuring resident rooms were free from bed bugs (small, oval, brown insects that feed on the blood of animals and humans) (Residents #8 and #10). The sample was 10. The census was 97.</p> <p>Review of the facility's Pest Control policy, last reviewed 8/31/24, showed:</p> <ul style="list-style-type: none"> <li>-Policy: The facility maintains an effective pest control program to remain free of pest and rodents. Pest control strategies are developed emphasizing kitchens, cafeterias. Laundries, central supply areas, loading docks, construction activities, and other regions prone to pest infestations. Environmental services/Designee will maintain records of pest control protocol and contracts with pest control services;</li> <li>-Responsibility: Maintenance Director, Environmental Services, and Administrator;</li> <li>-Procedure: <ul style="list-style-type: none"> <li>-General measures to decrease pests include the elimination of cracks and crevices;</li> <li>-A contract with a pest control company may be elected to assure routine inspections and chemical applications of pesticides;</li> <li>-The facility will contract for routine pest control services by a credentialed pest control specialist;</li> <li>-Employees handling pesticides must be knowledgeable on the regulatory requirements. Employees should be trained on the use of the chemical and application of appropriate personal protective equipment (PPE);</li> <li>-Regular inspections by the local and county sanitation departments are part of the pest control program;</li> <li>-The facility will follow state and local regulations on pest control.</li> </ul> </li> </ul> <p>1. Review of Resident #8's quarterly Minimum Data Set (MDS), a federally mandated assessment instrument completed by facility staff, dated 12/19/24, showed:</p> <ul style="list-style-type: none"> <li>-Cognitively intact;</li> <li>-Mood interview: symptoms present - feeling down, depressed, hopeless, and symptom frequency: 7-11 days (half or more of the days);</li> <li>-Sometimes feels isolated from those around him/her;</li> </ul> <p>(continued on next page)</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>-No functional limitations in range of motion in upper/lower extremities;</p> <p>-Diagnoses included bipolar disorder (Episodes of mood swings ranging from depressive lows to manic highs) and schizophrenia (a serious mental illness that affects how a person thinks, feels, and behaves).</p> <p>Observation on 2/3/25 at 10:54 A.M., showed a bed bug crawled along the zipper and underneath the flap of the mattress cover that was used to cover the zipper. A tear in the mattress cover, greater than two inches, was visible. The resident used his/her bare fingers to pick up, remove, and squish the bed bug between his/her fingers. Blood was visible on his/her index finger and thumb.</p> <p>During an interview on 2/3/25 at 10:54 A.M., the resident said two or three weeks ago the privacy curtain in his/her room had been loaded with bed bugs. The facility took that privacy curtain down to wash and gave him/her a new one. He/She pointed to a stand located against the wall nearest the entrance to his/her room and said the curtain that laid on top of the stand was the old privacy curtain that had been filled with bed bugs. Staff brought back it after it had been washed. He/She walked across the room, held the privacy curtain up, and pointed out stained areas that he/she thought was blood from the bed bugs.</p> <p>During an interview on 2/4/25 at 9:41 A.M., the resident said maintenance gave him/her a new mattress and mattress cover. He/She said his/her roommate got a new bed and mattress. The resident said maintenance sprayed around his/her room last night. He/She said having the bed bugs in his/her room was driving him/her crazy and made him/her want to climb up the wall. He/She said hopefully the bed bugs were gone. He/She talked to his/her guardian about moving because of the bed bugs. He/She didn't like dirty places.</p> <p>2. Review of Resident #10's annual MDS, dated [DATE], showed:</p> <p>-Cognitively intact;</p> <p>-Mood interview: symptoms present - feeling down, depressed, hopeless, and symptom frequency: 7-11 days (half or more of the days);</p> <p>-Sometimes feels isolated from those around him/her;</p> <p>-No functional limitations in range of motion in upper/lower extremities;</p> <p>-Diagnoses included anemia (lack of blood), anxiety disorder, depression, and post-traumatic stress syndrome (PTSD, difficulty recovering after experiencing or witnessing a terrifying event).</p> <p>Observation on 2/4/25 at 10:29 A.M., showed the resident seated on the side of the metal frame of his/her bed. A dark blue mattress was positioned up against the wall, with the bed frame exposed. There was dried blood and several smashed bed bugs on the resident's metal bed frame. He/She sat on/near the dried blood and smashed bed bugs as he/she put his/her clothing in a clear plastic bag. There was one live bed bug that crawled along the resident's metal bed frame. The bed bug crawled into one of the open holes located on the metal bed frame. The resident shared a room with other residents.</p> <p>(continued on next page)</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 2/4/25 at 10:29 A.M., the resident said he/she didn't have bugs. He/She bagged his/her clothes for laundry.</p> <p>During an interview on 2/4/25 at 11:54 A.M., the Housekeeping Supervisor said housekeeping was responsible for cleaning bed frames in resident rooms. He expected staff to follow the facility's cleaning schedule and policy.</p> <p>During an interview on 2/4/25 at 12:21 P.M., the Maintenance Director said he didn't know about the bed bugs in the resident's room. He said the Administrator told him about the bed bugs and thinks staff told her. He pulled the bed bug covers and clothes from the room. He had the resident's clothes bagged up and said he would put a bed bug cover over his/her mattress. He was going to treat the room.</p> <p>3. During an interview on 2/6/25 at 9:50 A.M., a representative from the pest control company the facility used, said they provided service to the facility semi-monthly and on an as needed basis. He/She said if bedbugs were stilled listed on the paperwork, then the facility probably didn't follow the recommendations.</p> <p>During an interview on 2/6/25 at 10:02 A.M., the pest control technician from the pest control company used by the building, said the building structure was not so much the problem as it was the rubber stuff (material sealed on the walls that the bedbugs can squeeze behind to hide) along the bottom of the walls and other places the bedbugs like to hide. He/She said they would like for the facility to do a lot of things, but they may not always have the money. The technician said when new residents came, their belongs should be taken and treated as well as giving the new resident a shower. He/She said bedbugs moved from person to person and when the facility moved a resident from a room that had bed bug activity, they spread the bedbug to the next room. The technician said staff could also be reintroducing bedbugs to the facility as well. He/She said the room with the problem should be isolated and treated. No one should be allowed back to the room until they knew the problem had been resolved. The technician said Resident #10's room had been a problem in the past and was ground zero. He/She said the mattress covers should not be removed once applied because they kept the bedbugs in and there was nowhere for them to hide. He/She said cleaning staff took the mattress covers off and threw them away. The mattress covers were expensive and cost \$100 each. Staff and residents needed to leave the mattress covers alone. He/She said leaving the mattress covers on was a big recommendation. The Maintenance Director had extra mattress covers and could install them if he noticed activity before the pest control company could provide service. He/She said the facility had been shown how to apply the covers, but they wouldn't leave them alone. He/She said there was a pest control book to show what he/she saw and what to do, but he/she can't remember the last time he/she saw the book. He/She didn't know if anyone even looked at it. He/She mainly texted the Maintenance Director. The Maintenance Director knew where the locations related to the recommendation were. The cracks and crevasses were removed by using the mattress covers and leaving them alone. He/She said the facility needed a strict procedure and he/she could work with the Maintenance Director on that.</p> <p>(continued on next page)</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 2/4/25 at 1:30 P.M., the Administrator said it was hard to get rid of the bed bugs. There was a problem with new residents bringing them in. When new residents came, they ran all their soft items through a heat process. The Maintenance Director used alcohol spray, which killed the bed bugs on the spot. They stripped the entire room. She said they had mattress covers but they weren't really good because the residents opened the mattress covers. The facility removed the zipper from the mattress covers to help keep the residents from opening the mattress covers once placed. The facility completed in-services with staff about the bed bugs and reporting them. The Administrator said the pest control technician would be there on Friday. She said the pest control technician said the facility was not cleared to spray again before Friday because the technician had just been there. She said the pest control technician zipped the mattresses up in a chemical pesticide mattress cover, the bed bugs can live up to six months without eating. The Administrator said the mattresses were thrown away based on the information given by Maintenance Director and the pest control technician. The Administrator said the Maintenance Director just started completing weekly resident room rounds to look at resident beds. They weren't doing that at first, but were now because of the newly discovered information. They've thrown away many mattresses. She said housekeeping was responsible to clean bed frames and resident rooms. She expected housekeeping, maintenance, and other staff to follow all the facility policies.</p> <p>MO00248497</p>