

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  265783	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  11/21/2024
NAME OF PROVIDER OR SUPPLIER  Mount Carmel Senior Living - St Charles, LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 723 First Capitol Drive Saint Charles, MO 63301	

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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p>46506</p> <p>Based on interview and record review, the facility failed to provide care in a dignified and respectful manner for two dependent residents (Resident #4 and #5), in a review of six residents. Residents reported Certified Nurse Aide (CNA) C was rough while providing care. The facility census was 86.</p> <p>Review of the facility policy Right to Dignity, Respect and Freedom, revised 10/25/23, showed the following:-Residents will be treated with consideration, respect and dignity;</p> <p>-Residents have a right to self-determination.</p> <p>1. Review of Resident #5's significant change Minimum Data Set (MDS), a federally mandated assessment instrument completed by facility staff, dated 9/15/24, showed the following:</p> <p>-The resident had severely impaired cognition;</p> <p>-He/She was dependent on staff for toileting, hygiene, and transfers;</p> <p>-He/She was always incontinent of bladder and bowel.</p> <p>Review of the resident's Care Plan, dated 9/15/24, showed the following:</p> <p>-Be patient and positive with the resident;</p> <p>-The resident needed assistance with activities of daily living (ADLs);</p> <p>-Be calm and gentle, do not rush or hurry the resident;</p> <p>-He/She was incontinent of bladder and bowel;</p> <p>-Cheerful dialogue with the resident while providing care to encourage and maintain self-esteem;</p> <p>-Monitor the resident for incontinent episodes and provide peri care after each episode;</p> <p>-Offer assistance to toilet every two hours and as needed.</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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 11/1/24 at 2:30 P.M., Certified Nurse Aide (CNA) D said the resident was tearful and said CNA C was rough with moving him/her in bed and the resident did not like it. CNA C had not reported this to anyone.</p> <p>During an interview on 11/1/24 at 3:15 P.M., the resident said the following:</p> <ul style="list-style-type: none"> <li>-A staff member was recently rough with him/her;</li> <li>-The resident was in bed and the staff member rolled the resident in bed and it felt like the staff member was in a hurry and it hurt;</li> <li>-The resident told the staff member that it hurt and the staff member said he/she was sorry but needed to get everything done;</li> <li>-The resident was upset about it and was tearful;</li> <li>-The resident felt he/she did not deserve it and did not want to be a bother. CNA D had asked the resident why he/she was crying and he/she relayed what had happened to him/her.</li> </ul> <p>2. Review of Resident #4's quarterly Minimum Data Set (MDS, a federally mandated assessment instrument, completed by the facility), dated 10/28/24, showed the following:</p> <ul style="list-style-type: none"> <li>-The resident had moderately impaired cognition;</li> <li>-He/She required maximal assistance with toileting hygiene;</li> <li>-He/She was always incontinent of bladder and bowel.</li> </ul> <p>Review of the resident's Care Plan, dated 11/1/24, showed the following:</p> <ul style="list-style-type: none"> <li>-The resident needed assistance with activities of daily living (ADLs);</li> <li>-Be calm and gentle, do not rush or hurry the resident;</li> <li>-He/She needed two staff members at all times when providing care;</li> <li>-Cheerful dialogue with the resident while providing care to encourage and maintain self-esteem;</li> <li>-If the resident was tearful, the resident wanted the staff to take the time to sit and talk with him/her to find out why and then make an attempt to rectify the problem or build up his/her self-esteem;</li> <li>-Diagnoses of major depressive disorder (serious mood disorder that affects how a person feels, thinks, and acts), mood disorder (mental health condition that affects a person's emotional state, causing long periods of extreme sadness, excessive happiness, or both), and Alzheimer's disease (progressive, irreversible brain disorder that destroys memory and thinking skills).</li> </ul> <p>During an interview on 11/1/24 at 12:50 P.M., the resident said the following:</p> <p>(continued on next page)</p>		

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<p>F 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>-On 10/31/24, CNA C said he/she was busy and asked the resident what he/she wanted now, when the resident used the call light;</p> <p>-On 10/31/24, when providing incontinence care, CNA C grabbed hold of the resident's left arm while rolling the resident over in bed and it hurt;</p> <p>-The resident told CNA C that grabbing onto his/her forearm hurt;</p> <p>-The resident did not report this to anyone else;</p> <p>-The resident was upset and did not understand why CNA C was upset with him/her because normally the resident and CNA C did not have any problems.</p> <p>During an interview on 11/1/24 at 5:05 P.M., the Director of Nursing said the following:</p> <p>-The expectation was staff treat the residents with dignity and respect and to work fast enough to complete resident care, but not to make the residents feel rushed or be rough during the provision of care;</p> <p>-CNA C was the type of employee who wanted to get everything done on his/her shift, so CNA C could have been in a hurry and was unintentionally rough;</p> <p>-She was unaware of the residents' concerns regarding CNA C.</p> <p>MO244399</p>