

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  505393	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  12/30/2024
NAME OF PROVIDER OR SUPPLIER  North Cascades Health and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE  4680 Cordata Parkway Bellingham, WA 98226	

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 0791</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide or obtain dental services for each resident.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 37035</b></p> <p>Based on observation, interview and record review the facility failed to promptly refer, reimburse or document on 1 of 1 resident (Resident 1) who had their dentures dropped, broken and subsequently lost at the facility. This failed practice placed the resident at risk of diminished quality of life and financial impact.</p> <p>Findings included .</p> <p>Review of the facility's policy titled, Dental Services - Dentures, dated October 2017, showed The Center assists residents as necessary or requested upon notification and confirmation of lost or damaged dentures, within 3 days of notification and confirmation, referred resident with lost or damaged dentures for dental services and documented the referral in the medical record. The Center reimbursed for confirmed damage or loss of dentures in the following circumstances: 1) Confirmed loss of dentures within the Center, 2) Damage of dentures that occurs as a result of Center actions, which may include, but is not limited to dentures which were dropped.</p> <p>Resident 1 admitted to the facility on [DATE], with diagnoses to include polyneuropathies (disorders that affect the peripheral nervous system or cranial nerves) and major depressive disorder.</p> <p>Review of a Dental Care Area assessment dated [DATE], showed Resident 1 had no natural teeth and had full dentures.</p> <p>Review of Resident 1's current care plan showed the following interventions initiated on 10/18/2024: 1) staff must assist resident to clean their dentures, 2) upper and lower mouth care to be provided each shift and as needed. Clean dentures in AM and at bedtime, dentures off at bedtime to cleanse and soak, 3) coordinate arrangements for dental care, transportation as needed/as ordered and 4) monitor/document/report as needed any signs or symptoms of oral/dental problems needing attention: teeth missing, loose, broken.</p> <p>Review of a social services progress note dated 08/01/2024, showed Collateral Contact (CC) 1, Resident 1's family member was spoken to regarding Resident 1, had shared with the staff they chipped a tooth to their lower dentures, and it was uncomfortable to eat. The dental clinic was notified, and CC 1 was to take the dentures into the clinic.</p> <p>Review of a social services progress note dated 08/12/2024, showed a voice mail was left for CC 1 that the resident had been scheduled for a denture appointment on 09/10/2024.</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 0791</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of the August 2024, Grievance Log showed an entry dated 08/12/2024, that Resident 1's dentures were lost, and an appointment had been scheduled for a new set.</p> <p>Review of the 08/12/2024, Grievance Form showed the resident had lost their bottom dentures. No dentures were found in the resident's room. Resident 1 was due for a new set anyway covered by insurance, and an appointment was scheduled for 09/10/2024.</p> <p>Review of a care conference note dated 08/16/2024, showed Resident 1 had an appointment on 09/10/2024 for a full set of dentures. The note also showed that the resident and licensed nurse and social worker were in attendance.</p> <p>Review of the dental clinic's note dated 10/01/2024, showed Resident 1's lower denture was misplaced at the facility since August 2024. The resident reported it was difficult for them to eat with only their upper denture.</p> <p>Review of a dental clinic note dated 10/02/2024 showed the facility was contacted by the clinic to see about coverage for the dentures and they were waiting to hear back.</p> <p>Review of a dental clinic note dated 10/30/2024, showed the clinic called the facility and spoke with Staff A, Social Services Director and Staff B, Business Office Manager about coverage for the lost denture while the resident was residing at the facility. Staff A and Staff B stated the facility was not covering the resident's dentures as the dentures were old and they felt that insurance should cover them.</p> <p>Review of a dental noted dated 11/04/2024, showed Resident 1 had no dental coverage through their Medicaid Advantage insurance plan.</p> <p>Review of a social services note dated 11/20/2024, showed CC 1 had not been able to pick up the dentures as things were tied up with paperwork from Medicaid. Reached out to the Home and Community Services (HCS) Case Worker and Supervisor regarding this and hope for a resolution soon.</p> <p>Review of the dental note dated 12/10/2024, showed the State Agency stated the facility needed to pay for Resident 1's new dentures. CC 1 had requested the statement be sent to Staff A's email.</p> <p>Review of a HCS Case Worker note dated 12/10/2024, showed the facility's social worker had contacted them requesting HCS contact CC 1 and explain they would need to submit a denture bill to Public Benefit Specialist to request a deduction in the Skilled Nursing Facility participation so the resident could pay for new dentures that had been at the dental clinic for months awaiting to be paid. CC 1 reported that in August the caregiver at the facility had dropped the resident dentures in the sink, causing a chip. CC 1 reported that the facility's social worker had informed them that the facility would pay to have the denture repaired. CC 1 then reported when they went to pick up the denture it was lost. CC 1 reported they were told to go to the dental clinic for lower dentures and the facility would pay for them. CC 1 scheduled the final fitting appointment to pick up the new dentures, the dental clinic said they wouldn't release the dentures until the bill was paid. The dental clinic was expecting payment from the facility and had never been told that Medicaid was involved. CC 1 scheduled three subsequent final fitting appointments, each cancelled by the dental clinic because the facility never paid the bill.</p> <p>(continued on next page)</p>		

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<p>F 0791</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of the psychologist follow up note dated 12/17/2024 at 8:00 AM, showed Resident 1 reported mild anxiety about getting their dentures.</p> <p>Review of Resident 1's medical record showed no documentation of when the resident's denture was dropped and chipped or when the resident's denture was unable to be located.</p> <p>In a phone interview on 12/23/2024 at 12:10 PM, CC 1, stated back in August the facility had broken Resident 1's denture, there was an appointment to get them repaired but when they went to pick of the denture from the facility the denture was lost. CC 1 stated the facility was not wanting to pay for the denture. CC 1 stated Resident 1 had been fighting through it, and they had to have a different menu. CC 1 stated the staff who dropped the denture apologized but the facility refused to make an appointment. CC 1 stated they would not want anyone else to have to go through this difficult process.</p> <p>In an interview on 12/23/2024 at 1:08 PM, Resident 1, was observed with upper and lower dentures. Resident 1 stated they had to get new dentures as the facility had broken the old ones. The resident stated it was hard to eat food when they had no teeth.</p> <p>In an interview on 12/24/2024 at 2:27 PM, Staff C, RN/Director of Nursing Services, stated if staff dropped and broke a resident's dentures the facility would do whatever to fix or replace the dentures. Staff C stated Staff A was involved but recalled that the facility pays for dentures. Staff C stated they recalled discussing Resident 1's denture issue in clinical stand-up meeting and Staff C and the Unit Coordinator would schedule the dental appointment and what needed to be done to be replaced would be Social Services responsibility. Staff C stated the financial part of the dental repair or replacement would come from the Administrator; they would authorize payment.</p> <p>In an interview on 12/30/2024 at 2:55 PM, Staff A, stated Resident 1 had got a nick in their dentures when the staff had dropped their dentures. Staff A stated that the resident's dentures were [AGE] years old, and they were going to get them a new set thorough the resident's insurance. Staff A stated the facility's policy was to pay for dentures if they were lost or broken at the facility.</p> <p>In an interview on 12/30/2024 at 3:04 PM, Staff D, Administrator, stated they found out that Resident 1 was eligible to get a new pair of dentures under their Medicaid insurance coverage. Staff D stated typically they get the resident in for a fitting and if they are eligible to get paid under their insurance, they are paid for by their insurance but if not, the facility pays for them.</p> <p>Refer to WAC 388-97-1060(1)(3)(j)(vii)</p>		