

Missouri Department of Health and Senior Services

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 28804 | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 07/30/2024 |
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| NAME OF PROVIDER OR SUPPLIER LA BONNE MAISON - ASSISTED LIVING BY AMERICA | STREET ADDRESS, CITY, STATE, ZIP CODE 226 PLAZA DRIVE SIKESTON, MO 63801 |
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| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETE DATE |
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| A8004 | <p>19 CSR 30-88.010(4) Resident Rights-Admission/Annual Review</p> <p>Each resident admitted to the facility, or his or her next of kin, legally authorized representative or designee, shall be fully informed of the individual's rights and responsibilities as a resident. These rights shall be reviewed annually with each resident, and/or his or her next of kin, legally authorized representative or designee, either in a group session or individually H/III</p> <p>This regulation is not met as evidenced by Class III</p> <p>Based on interview and record review, the facility staff failed to ensure that three of three sampled residents (Resident #1, #2 and #3) or their legal representative had their residents rights reviewed annually. The facility census was 29.</p> <p>1. Review of Resident #1's medical record showed: - Resident admitted on 08/11/2015; - Last updated Resident Rights document dated 02/27/2023.</p> <p>2. Review of Resident #2's medical record showed: - Resident admitted on 08/02/2020; - Last updated Resident Rights document dated 06/27/2023.</p> <p>3. Review of Resident #3's medical record showed: - Resident admitted on 01/28/2022; - Last updated Resident Rights document dated 02/27/2023.</p> <p>During an interview on 07/30/2024 at 11:30 A.M., Facility Staff (FS) A said the resident rights are</p> | A8004 | | |
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| Missouri Department of Health and Senior Services LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Samuel Corra</i> | TITLE <i>Admin. Asst.</i> | DATE <i>08/21/24</i> |
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| A8004 | Continued From page 1 usually updated with the annual care plan review and since there was another staff take over this task, the annual review was not done at this time. FS A said this review would be done as soon as possible. The facility did not provide a written policy for the annual updates of the Resident Rights. | A8004 | | |
| A8010 | 19 CSR 30-88.010(10) Advance Directive Requirements Prior to or upon admission and at least annually after that, each resident or his or her next of kin, legally authorized representatives or designees shall be informed of facility policies regarding provision of emergency and life-sustaining care, of an individual's right to make treatment decisions for himself or herself and of state laws related to advance directives for health-care decision making. The annual discussion may be handled either on a group or on an individual basis. Residents' next of kin, legally authorized representatives or designees shall be informed, upon request, regarding state laws related to advance directives for health-care decision making as well as the facility's policies regarding the provision of emergency or life-sustaining medical care or treatment. If a resident has a written advance health-care directive, a copy shall be placed in the resident's medical record and reviewed annually with the resident unless, in the interval, he or she has been determined incapacitated, in accordance with section 475.075 or 404.825, RSMo. Residents' next of kin, legally authorized representatives or designees shall be contacted annually to assure their accessibility and understanding of the facility policies regarding emergency and life-sustaining care. | A8010 | | |

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| A8010 | <p>Continued From page 2</p> <p>II/III</p> <p>This regulation is not met as evidenced by: Class III</p> <p>Based on interview and record review, the facility failed to ensure that three of three sampled residents (Resident #1, #2 and #3) or their legal representative had their Advance Directive reviewed annually. The facility census was 29.</p> <p>1. Review of Resident #1's medical record showed: - Resident admitted on 08/11/2015; - Last updated Advance Directive document dated 02/27/2023.</p> <p>2. Review of Resident #2's medical record showed: - Resident admitted on 08/02/2020; - Last updated Advance Directive document dated 06/27/2023.</p> <p>3. Review of Resident #3's medical record showed: - Resident admitted on 01/28/2022; - Last updated Advance Directive document dated 02/27/2023.</p> <p>During an interview on 07/30/2024 at 11:30 A.M., Facility Staff (FS) A said the Advance Directives are usually updated with the annual care plan review and since there was another staff take over this task, the annual review was not done at this time. FS A said this review would be done as soon as possible.</p> <p>The facility did not provide a written policy for the annual updates of the Advance Directives.</p> | A8010 | | |

PLAN OF CORRECTION

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| Provider/Supplier Name: | La Bonne Maison- Assisted Living by Americare | |
| Street Address, City, Zip: | 226 Plaza Drive, Sikeston MO 63801 | |
| Date of Survey: | 7/30/24 | |
| PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER | | |
| ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION: (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | COMPLETION DATE |
| A8004 | <p>19 CSR 30-88.010 (4) Resident Rights- Admission/Annual Review</p> <p>Each resident admitted to the facility, or his or her next of kin, legally authorized representative or designee, shall be fully informed of the individual's rights and responsibilities as a resident. These rights shall be reviewed annually with each resident, and/or his or her next of kin, legally authorized representative or designee in a group session or individually. I/II</p> | 9/9/24 |
| | The facility will ensure that all residents or their legal representative have their residents' rights reviewed upon admission and annually. | |
| | All residents who reside at the facility are considered at risk for this deficient practice. | |
| | Resident #1's annual resident rights review has been completed with the resident and/or their legal representative. | |
| | Resident #2's annual resident rights review has been completed with the resident and/or their legal representative. | |
| | Resident # 3's annual resident rights review has been completed with the resident and/or their legal representative. | |
| | Administrator and or designee has completed an audit of all residents' medical records to ensure that residents rights have been reviewed upon admission and annually with resident and/or their legal representatives and record of this review is added to resident medical records. | |
| | Regional nurse consultant and or Designee will in-service Director of Nursing on resident rights review to ensure that all residents admitted to the facility or his or her next of kin, legally authorized representative or designee, shall be fully informed of the individual's rights and responsibilities as a resident. These rights shall be reviewed annually with each resident, and/or his or her next of kin, legally authorized representative or designee in a group session or individually. | |
| | Director of Nursing and or Designee will audit new and current residents' charts monthly to ensure that resident rights review has been completed upon admission and annually with the resident and/or legal representative. Director of Nursing will report continued compliance to the Administrator monthly on the DON report. | |

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| A8010 | <p>19 CSR 30-88.010 (10) Advanced Directive Requirements Prior to or upon admission and at least annually after that, each resident or his or her next of kin, legally authorized representatives or designees shall be informed of facility policies regarding provision of emergency and life-sustaining care, of an individual's right to make treatment decisions for himself or herself and of state laws related to advance directives for health-care decision making. The annual discussion may be handled either on a group or on an individual basis. Residents' next of kin, legally authorized representatives or designees shall be informed upon request, regarding state laws related to advance directives for health-care decision making as well as the facility's policies regarding medical care or treatment. If a resident has a written advance health-care directive, a copy shall be placed in the resident's medical record and reviewed annually with the resident unless in the interval, her or she has been determined incapacitated, in accordance with section 475.075 or 404.825. RSMo Residents' next of kin, legally authorized representatives or designees shall be contacted annually to assure their accessibility and understanding of the facility policies regarding emergency and life-sustaining care.</p> | 9/9/24 |
| | <p>The facility will ensure that Advanced Directives have been reviewed upon admission and annual with all residents and or their legal representatives.</p> | |
| | <p>All residents who reside at the community are considered at risk for this deficient practice</p> | |
| | <p>Resident #1's Annual Advanced Directive review has been completed with the resident and or his/her legal representative and documentation has been uploaded in resident medical record.</p> | |
| | <p>Resident #2's Annual Advanced Directive review has been completed with the resident and or his/her legal representative and documentation has been uploaded in resident medical record.</p> | |
| | <p>Resident #3's Annual Advanced Directive review has been completed with the resident and or his/her legal representative and documentation has been uploaded in resident medical record.</p> | |
| | <p>Administrator and or designee has completed an audit of all residents' medical records to ensure that Advanced Directives have been reviewed upon admission and annually with resident and/or their legal representatives and record of this review is added to resident medical records.</p> | |
| | <p>Regional Nurse Consultant and/or designee will in-service Director of Nursing on ensuring that all residents admitted to facility and annually their after will have their Advanced Directives reviewed with the resident and/or their legal representative.</p> | |
| | <p>Director of Nursing and or Designee will audit new and current residents' charts monthly to ensure that Advanced Directives review has been completed upon admission and annually with the resident and/or legal representative. Director of Nursing will report continued compliance to the Administrator monthly on the DON report</p> | |

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The Administrator signing and dating the first page of the CMS-2567/State Form is indicating their approval of the plan of correction being submitted on this form.