

Missouri Department of Health and Senior Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 23683C	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/17/2024
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NAME OF PROVIDER OR SUPPLIER BUNGALOWS AT BRANSON MEADOWS, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 5351 GRETNA ROAD BRANSON, MO 65616
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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
A4275	<p>19 CSR 30-86.042(40) Physicians Orders & Proper Care</p> <p>Residents shall receive proper care to meet their needs. Physician orders shall be followed. I/II</p> <p>This regulation is not met as evidenced by: Based on interview and record review, the facility failed to provide proper care and follow physicians' orders for all residents when staff failed to ensure a process was in place to provide ordered wound care treatments, failed to document the treatment in the resident's medical record of wound treatments, and failed to ensure timely documented assessments of a wound to monitor for wound changes were completed for one resident (Resident #1) admitted with a heel wound. The resident was admitted to the hospital for treatment of an infected heel wound.</p> <p>Review showed the facility did not provide a policy or procedure related to wound care.</p> <p>1. Review of Resident #1's face sheet (a brief profile) showed the following:</p> <ul style="list-style-type: none"> -Admission date of 07/20/24; -Diagnoses included diabetes mellitus type II (a long-term condition in which the body has trouble controlling blood sugar and using it for energy), high blood pressure, and spondylolisthesis (a spinal disorder in which a bone (vertebrae) slips forward onto the bone below it). <p>Review of the resident's progress notes showed the following:</p> <ul style="list-style-type: none"> -On 07/20/24, at 7:56 P.M., resident moved his/her belongings into the community and will begin staying tomorrow. Resident was recovering from a June accident, which left him/her with a 	A4275		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *[Signature]* TITLE **Executive Director** (X6) DATE **10.29.24**

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A4275	<p>Continued From page 1</p> <p>fractured pelvis and right heel wound. Resident able to ambulate with a walker, but due to the heel wound would be utilizing a wheelchair as primary mode of mobility;</p> <p>-On 07/22/24, at 3:16 P.M., hospice staff called about the resident's discharge from hospice. The family wanted him/her discharged from hospice and to begin physical therapy. Staff will send chart to home health for evaluation;</p> <p>-On 07/23/24, at 9:28 P.M., the resident informed staff he/she would like to continue with hospice for now. Staff phoned hospice and requested updated orders, medication list, and a nurse to visit. Hospice nurse came to the facility to visit and bandage to left heel was changed.</p> <p>Review the resident's record showed the following:</p> <p>-An order, dated 07/21/24, from the hospice provider, for a left heel deep tissue injury (intact skin with localized area of persistent non-blanchable deep red, maroon, purple discoloration due to damage of underlying soft tissue). Staff to clean with wound cleanser, pat dry with clean gauze, place pea size amount of Medihoney (a medical-grade honey wound dressing that is used to treat wounds and burns) over wound, cover with telfa, dry sterile gauze, and Kerlix (bandage used to cushion and protect area). Staff to change every three days and as needed for soiling or bathing. The care may be performed by trained care giver or skilled nurse.</p> <p>Review of the resident's physician order sheet showed an order, dated 07/24/24, to apply Medihoney topically to affected areas as directed at bedtime. (The order did not included specifications of the area affected and did not contained the detailed instructions of the hospice</p>	A4275		

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A4275	<p>Continued From page 2 order.)</p> <p>Review of the resident's hospice medication list showed the following:</p> <p>-An order, undated, for Medihoney 80% topical gel for wound cleaning to left heel deep tissue injury. Staff to cleanse wound with wound cleaner, pat dry with clean gauze, place pea sized Medihoney gel over wound, cover with telfa and Kerlix. Staff to change every three days and as needed if loose/soiled. Care can be completed by trained caregiver or hospice skilled nurse. Staff to place foot in padded boot at bedtime and off load pressure with pillow when sitting/lying.</p> <p>Review of the resident's August 2024 Treatment Administration Record (TAR) showed the following:</p> <p>-An order, dated 07/24/24, to apply Medihoney topically to affected areas as directed at bedtime. (The order did not included specifications of the area affected and did not contained the detailed instructions of the hospice order.)</p> <p>-Staff did not document completion of the ordered treatment to the resident's hell wound during the month of August 2024.</p> <p>Review of the resident's progress notes showed the following:</p> <p>-On 08/20/24, at 12:34 P.M., nurse from hospice advised staff the resident was being discharged from hospice due to no longer meeting the criteria to remain one of their patients;</p> <p>-On 08/25/24, at 10:22 A.M., resident waited to establish care with facility physician. An addendum dated 09/12/24, at 12:12 P.M., showed a nurse performed wound care to left</p>	A4275		

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A4275	<p>Continued From page 3</p> <p>heel;</p> <p>-On 08/26/24, at 11:07 A.M., a licensed practical nurse (LPN) from home health came to facility regarding resident's wound care and physical therapy. The LPN stated he/she would go by the facility physician's and inform a recent visit needed to be conducted before home health would start wound care or physical therapy;</p> <p>-On 08/28/24, at 1:50 P.M., staff documented new orders by facility physician to obtain labs. An addendum dated 09/12/24, at 12:45 P.M., showed resident had first visit with facility physician after being discharged from hospice.</p> <p>Review of the resident's physician's note, dated 08/28/24, showed the following:</p> <p>-Staff requested an evaluation of chronic wound to the left heel;</p> <p>-No fever or chills, normal drainage;</p> <p>-Wound is positive for odor;</p> <p>-Skin warm and dry with ulceration to left heel;</p> <p>-Recommend wound care and hold on antibiotics. Reviewed case with on-site team and wound care nurse. Staff to complete Medihoney treatment to area and other treatment recommendations by team would be good first steps. (Note: The resident's original order for Medihoney application began on 07/21/24. This order was not a change.)</p> <p>Review of the resident's progress note dated 08/30/24, at 7:34 P.M., showed home health contacted the facility regarding the resident's admission and stated it would probably be after the holiday weekend before resident would be admitted due to delay in getting referral and face-to-face. Nurse performed wound care to the resident's left heel.</p>	A4275		

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A4275	<p>Continued From page 4</p> <p>Review of the resident's service plan, dated 8/31/24, showed the following:</p> <ul style="list-style-type: none"> -Resident had current needs regarding his/her skin; -Resident will have assistance with nurse having wounds; -Wound to left heel managed by home health; -Keep dressing clean, dry, and intact; -Notify home health if soiled or dislodged. <p>Review of the resident's September 2024 TAR showed the following:</p> <ul style="list-style-type: none"> -An order, dated 07/24/24, to apply Medihoney topically to affected areas as directed at bedtime. (The order did not included specifications of the area affected and did not contained the detailed instructions of the hospice order.); -Staff did not document completion of the ordered treatment to the resident's hell wound during the month of September 2024. <p>Review of the resident's progress notes showed the following:</p> <ul style="list-style-type: none"> -On 09/04/24, at 4:30 P.M., staff contacted home health regarding resident's wound care and was told they were waiting on insurance approval and to call back later in the day. Staff called later in the day and was told they have still not received visit notes from the facility physician. The facility physician states the notes have been sent two times. Staff contacted LPN at home health who stated he/she would get back with staff and facility physician and would call back tomorrow morning; -On 09/09/24, at 3:48 P.M., resident switched to different home health due to repeated delays in starting care. New home health would be at the 	A4275		

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A4275	<p>Continued From page 5</p> <p>facility tomorrow, 09/10/24, to see the resident and begin wound care; -On 09/10/24, at 4:15 P.M., staff from home health visited resident today regarding resident's wound care, believed the wound to be infected, and would be contacting the wound care clinic to see how soon the resident could be seen. Home health to call the facility tomorrow with details; -On 09/11/24, at 1:42 P.M., (late entry for 09/05/24) showed staff contacted LPN from home health regarding visit notes for resident's wound care. LPN said the handwritten notes the facility physician provided were not acceptable and would have to be typed up. Waiting on formal notes from the facility physician.</p> <p>Review of the resident's service plan, dated 09/11/24, showed staff updated with urgent care evaluation due to possible infection and admitted to the hospital for intravenous (in the vein) antibiotic and wound treatment.</p> <p>Review of the resident's progress notes showed the following:</p> <p>-On 09/12/24, at 10:59 A.M., late entry for 09/11/24, resident went to urgent care to have his/her wound on heel checked out for possible infection; -On 09/12/24, at 11:24 A.M., resident admitted to the hospital for infection in his/her foot. Resident was currently on intravenous antibiotics and continued testing. Staff notified the facility physician; -On 09/12/24, at 12:41 P.M., resident's son was contacted and made aware of resident being admitted to the hospital for an infection of his/her right heel; -On 09/12/24, at 4:22 P.M., staff contacted the hospital for an update on resident. The nurse</p>	A4275		
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A4275	<p>Continued From page 6</p> <p>advised the resident had been taken for an incision and drainage procedure and that they would attach a wound vac (a treatment that uses suction to help heal wounds);</p> <p>-On 09/13/24, at 4:18 P.M., social worker from the hospital called and informed the resident had a reaction to the anesthesia and currently has a sitter until wears off. Resident will be kept at the hospital through the weekend;</p> <p>-On 09/17/24, at 11:53 A.M., social worker from the hospital called to advise the resident will need six weeks of intravenous antibiotics and she is contacting other facilities for placement.</p> <p>Review of the resident's records, dated 07/20/24 to 09/16/24, showed facility staff did not have documentation or tracking for wound care provided to the resident by the hospice service.</p> <p>During interviews on 09/17/24, at 2:43 P.M. and 5:45 P.M., Level One Medication Aide (LIMA) A said the following:</p> <p>-Wound care was provided by home health and hospice;</p> <p>-LIMA's can only provide basic wound care such as first aid;</p> <p>-He/she would document any skin changes in an incident report and/or a shower sheet and would notify the Resident Care Director (RCD), Executive Director, physician, and family.</p> <p>During interviews on 09/17/24, at 2:49 P.M. and 5:40 P.M., LIMA B said the following:</p> <p>-Wound care was provided by home health services and hospice;</p> <p>-LIMAs were not trained to perform wound care and can only provide basic care such as barrier cream;</p>	A4275		

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A4275	<p>Continued From page 7</p> <p>-He/she would document any skin changes in an incident report and/or shower sheet and would notify the RCD.</p> <p>During the interview on 09/17/24, at 2:58 P.M., the RCD said the following:</p> <p>-Home health care agencies and hospice provide wound care for the facility;</p> <p>-Physician orders for wound care are sent to the facility, and he sends them along with the face sheet, insurance information, and doctor visits and sent to the outside agency who is to provide the wound care;</p> <p>-The wound care provider should be completing an outside agency form with every visit, which is then put in his mailbox for him to enter a progress note from the visit in the resident's electronic record. He then puts the form in the resident's hard chart;</p> <p>-The first hospice was providing the resident's wound care and would not complete the required outside agency forms. There was only one form completed in the chart, which was a shower sheet dated 07/25/24;</p> <p>-He did not know how many times per week hospice was ordered to provide wound care for the resident or if they were completing the treatment;</p> <p>-The facility had no system in place to effectively track wound care treatment;</p> <p>-The original order of 07/24/24, was to complete wound care at bedtime and hospice is not at the facility every day and the facility staff do not provide wound care;</p> <p>-He did not know how the orders from the home health agencies read;</p> <p>-He did have a conversation with hospice about completing the outside agency forms and they said they would complete them, but then</p>	A4275		

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A4275	<p>Continued From page 8</p> <p>discharged the resident from hospice and referred him to home health for wound care; -Home health never completed a wound treatment on the resident; -He sent a referral for a wound care evaluation to a new home health on 09/09/24; -The Executive Director completed a couple of wound treatments on the resident after hospice discharged the resident on 08/20/24, and before the new home health evaluated the resident on 09/10/24.</p> <p>During an interview on 09/17/24, at 4:38 P.M., the Executive Director said the following:</p> <p>-Home health care agencies and hospice provide wound care for the facility; -LIMAS can change a bandage daily and provide first aid, but they cannot apply Medihoney as it is a Santyl (ointment used to remove damaged tissue from chronic skin ulcers), which is considered a debridement and cannot be completed in house; -LIMAs notify her or the RCD when orders for wound care come through the fax machine in the medication room; -The family is then called for a preference in home health care agencies or hospice and then a referral along with the face sheet, insurance cards, and face to face physician notes required by Medicare are sent to the chosen wound care provider; -If wound care orders are changed, the facility does not know unless the wound care provider notifies of the changes, or the provider is using an in-house physician as new orders would be sent directly to the facility; -The original order of 07/24/24, to apply Medihoney at bedtime was informational and was changed, but she did not know what the new</p>	A4275		

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A4275	<p>Continued From page 9</p> <p>order was and did not know the hospice sheet showed wound care was to be provided every three days;</p> <p>-An outside agency form should be completed with every visit for wound care treatment by the provider;</p> <p>Hospice was not completing the forms and was not updating their own binders they kept onsite. They removed the binders when a resident is discharged from hospice;</p> <p>-The facility needs to put a process in place of having wound care providers notify her when in the facility to provide wound care;</p> <p>-The resident should have had his/her last wound care treatment from hospice on 08/20/24, but she did not know if the treatment was provided because no outside agency form was completed;</p> <p>-She completed a wound care treatment on the resident on 08/25/24 but did not document the assessment of the wound. She said it had slough (non-viable yellow, tan, gray, green or brown tissue; usually moist, can be soft, stringy and mucinous in texture) and eschar (dead or devitalized tissue that is hard or soft in texture; usually black, brown, or tan in color, and may appear scab-like) around edges, faint odor, draining was not purulent (containing pus) and serosanguineous (fluid containing both blood and serum);</p> <p>-The physician evaluated the resident on 08/28/24, and did not observe signs or symptoms of infection;</p> <p>-She completed wound care again on 08/30/24, but did not document the assessment of the wound, but noted no changes from 08/25/24;</p> <p>-She continued to assume home health would come to the facility to provide wound care for the resident;</p> <p>-The facility is responsible for ensuring residents receive wound care, and the resident should have</p>	A4275		

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A4275	Continued From page 10 been sent to the emergency room sooner; -No staff member assessed or treated the wound from 08/30/24 until 09/10/24. MO00241921	A4275		
A8023	19 CSR 30-88.010(23) Develop/Implement A/N Policies The facility shall develop and implement written policies and procedures that prohibit mistreatment, neglect, and abuse of any resident and misappropriation of resident property and funds, and develop and implement policies that require a report to be made to the department for any resident or to both the department and the Department of Mental Health for any vulnerable person whom the administrator or employee has reasonable cause to believe has been abused or neglected. II/III This regulation is not met as evidenced by: Based on interview and record review, the facility failed to follow their abuse/neglect policies when the home failed to complete and document a full investigation of an allegation of misappropriation of one resident's (Resident #2) bank card. The facility census was 61. Review of the facility policy titled, "Abuse, Neglect and Exploitation Policy, last revised 12/06/22, showed the following: -Purpose to protect residents from physical, mental, fiduciary (financial), sexual and verbal abuse or neglect; -Fiduciary abuse is the improper use of the property, income, resources, or trust funds of the resident by any person for their personal profit or	A8023		

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A8023	<p>Continued From page 11</p> <p>advantage;</p> <ul style="list-style-type: none"> -Any alleged or suspected abuse, neglect or exploitation should be immediately reported to the required state agencies, regardless of the length of time since the alleged occurrence took place; -The investigation into allegations of abuse, neglect, or exploitation will be conducted in privacy and documented by the Executive Director or designee; -The Executive Director or designee will immediately begin an investigation to establish the chain of events and circumstances leading to the allegation and to determine the validity of the allegation; -If the involved individual is an employee of the community, the employee must be put on administrative leave until the investigation has been completed; -The investigation must be completed within the state specified timeframe and reported to the necessary state agencies; -In the event that the findings of the investigation validate the occurrence, the Executive Director shall proceed with appropriate corrective actions. <p>1. Review of Resident #2's face sheet (a brief resident profile) showed the following;</p> <ul style="list-style-type: none"> -Admission date of 07/31/24; -Diagnoses included congestive heart failure (chronic condition in which the heart doesn't pump blood as well as it should) and stage three kidney disease (stage where the kidneys are moderately damaged and have reduces ability to filter waste and fluid from the blood). <p>Review of the resident's Wellness and Health Assessment, dated 07/31/24, showed the resident was alert and oriented with periods of confusion.</p>	A8023		

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NAME OF PROVIDER OR SUPPLIER BUNGALOWS AT BRANSON MEADOWS, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 5351 GRETNA ROAD BRANSON, MO 65616
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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
A8023	<p>Continued From page 12</p> <p>Review of the resident's service plan, dated 08/14/24, showed the following:</p> <ul style="list-style-type: none"> -Resident's family was his/her power of attorney (POA - a legal document that gives someone the authority to act on your behalf); -Resident will be assisted with his/her POA to optimize level of functioning. <p>Review of the facility's investigation showed the following:</p> <ul style="list-style-type: none"> -On 08/20/24, at 12:05 P.M., the resident's family member reported the resident's wallet missing to the business office manager; -The family member said he/she was not accusing anyone, but he/she took the resident out to appointments on 08/19/24, and he/she got the wallet out of the resident's shirt pocket to show identification at an appointment. He/she was 99.9% sure he/she put it back in the resident's pocket; -The resident's family member received notification of two transactions pending as of 08/20/24 at Wal-Mart and Casey's. He/she canceled the resident's card that was used at both locations; -The Executive Director and the Resident Care Director (RCD) did a thorough search of the resident's room and common areas. They were unable to locate the resident's wallet; -On 08/23/24, the family member received camera footage from Casey's and sent the photos to the RCD at approximately 12:35 P.M.; -The photos of the person using the resident's card was identified by the Executive Director and RCD as Level I Medication Aide (LIMA) C, an employee of the facility. <p>(The investigation did not include interview with</p>	A8023		

Missouri Department of Health and Senior Services

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NAME OF PROVIDER OR SUPPLIER BUNGALOWS AT BRANSON MEADOWS, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 5351 GRETNA ROAD BRANSON, MO 65616
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A8023	<p>Continued From page 13 other staff members.)</p> <p>During an interview on 09/17/24, at 12:24 P.M., Licensed Medication Aide (LIMA) A aid the following:</p> <ul style="list-style-type: none"> -It would not be appropriate for staff to take a resident's wallet; -Staff stealing anything from a resident is considered abuse; -He/she would report a misappropriation allegation to the Executive Director immediately. <p>During an interview on 09/17/24, at 2:49 P.M., LIMA B said the following:</p> <ul style="list-style-type: none"> -It would not be appropriate for staff to take a resident's wallet; -Staff stealing anything from a resident is considered abuse; -He/she would report a misappropriation allegation to the RCD or Executive Director immediately. <p>During an interview on 09/17/24, at 2:58 P.M., the RCD said the following:</p> <ul style="list-style-type: none"> -Misappropriation of any resident property by staff is considered abuse; -He would report any allegation of misappropriation to the Executive Director immediately; -The resident's family member reported the missing wallet to him, and he reported to the Executive Director immediately; -LIMA C was suspended pending completion of an investigation. <p>During an interview on 09/17/24, at 4:38 P.M., the Executive Director said the following:</p>	A8023		

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A8023	<p>Continued From page 14</p> <ul style="list-style-type: none"> -Misappropriation of resident property by staff was considered abuse; -Staff should report any misappropriation allegation to her immediately; -The facility should report misappropriation allegations within 24 hours to the state agency; -She reported the allegation to the state agency once she knew the wallet was not missing, but had been stolen. She also made a police report; -Alleged perpetrators of misappropriation are suspended immediately pending an investigation; -Investigations should include interviewing residents and staff; -She interviewed residents for this investigation, but did not find it necessary to interview staff with this incident; -She was able to identify the person in the camera footage as LIMA C; -She did not have a plan in place for identifying other residents with the potential to be affected, what measures will be put in place to prevent future misappropriation, and monitoring to ensure the misappropriation does not occur again. <p>MO00241028</p>	A8023		

