

Department of Health and Human Services
Division of Public Health
Licensure Unit
301 Centennial Mall So, P O Box 94986
Lincoln, NE 68509-4986

2/19/16dj

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
CERTIFIES THAT

St. Joseph Villa Nursing Center
MEETS STATUTORY REQUIREMENTS AS
SKILLED NSG/NSG FAC DISTINCT PART

Services
PHYSICAL THERAPY
OCCUPATIONAL THERAPY
SPEECH THERAPY
ALZHEIMER UNIT

Lic # 264017

EXPIRES
03/31/2017

 
COURTNEY R. PHILLIPS, MPA
Chief Executive Officer
Department of Health and Human Services

Cut on heavy line and place on license.

FACILITY NAME: St. Joseph Villa Nursing Center

ADDRESS: 2305 SOUTH 10TH STREET, OMAHA, NE 68108

This is to verify that your SKILLED NSG/NSG FAC DISTINCT PART is licensed through the date indicated on the above renewal card. Place the renewal card in the lower left hand corner of your original license.

Please notify this office at the address listed above of any change in name, address, or ownership.

FEB 11 2016

Make Payment to DHHS LU

Renewal Fees:
1 - 50 beds: \$1550
51 - 100 beds: \$1750
101 or more: \$1950



NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
Licensure Unit

RECEIVED

Expiration Date

03/31/2016

Nursing Home Licensure Renewal Application

Nursing Home Type: Please Check Skilled Nursing Facility Nursing Facility Intermediate Care Facility

IDENTIFYING INFORMATION

1. NAME AND ADDRESS OF FACILITY:

St. Joseph Villa Nursing Center
2305 SOUTH 10TH STREET
OMAHA, NE 68108

2. PREFERRED MAILING ADDRESS (IF DIFFERENT FROM FACILITY ADDRESS) FOR THE RECEIPT OF OFFICIAL NOTICES FROM THE DEPARTMENT:

LICENSE NO: 264017

TELEPHONE NUMBER: (402) 345-5683

FAX NUMBER: (402) 345-1817

ADMINISTRATOR: HECTOR LEGUILLOW

DIRECTOR OF NURSING: MARY SMITH, R.N.

E-Mail Address, if available: hlequillow@delmargardens.com

3. FEDERAL EMPLOYER IDENTIFICATION NUMBER OF THE FACILITY:

4. NUMBER OF BEDS TO BE RELICENSED: 184

5. ACCREDITATION/CERTIFICATION: JCAHO Medicare Medicaid Other
Are you requesting deemed status? yes no

6. SPECIAL CARE AND TREATMENT SPECIFICALLY FOR THE FOLLOWING GROUPS:
If different from Current Services listed, please check changes.

Physical Therapy Alzheimers/Special Care Unit Speech Therapy
 Pediatric Respiratory Occupational Therapy
 Behavioral Needs

Current Services
PHYSICAL THERAPY
OCCUPATIONAL THERAPY
SPEECH THERAPY
ALZHEIMER UNIT

REC'D MISS ACCOUNTING
2016 FEB 16 A 9:56

OWNERSHIP INFORMATION

7. OWNERSHIP OF FACILITY: DELMAR GARDENS OF OMAHA, LLC
(Legal Name of individual or business organization)

MAILING ADDRESS: 14805 N OUTER 40 ROAD, STE 300
CHESTERFIELD, MO 63017

8. BUSINESS ORGANIZATION: (Check one):

Sole Proprietorship
 Partnership
 Limited Partnership
 Corporation
 Limited Liability Company
 Governmental (____ State, ____ District, ____ County, ____ City or Municipal)
 Other (Please Specify) _____

(check one)
 Profit Non Profit

CERTIFICATION

I/we have read the Rules and Regulations issued by the Nebraska Department of Health and Human Services and will comply with them should a license be issued. I/we certify that to the best of my/our knowledge, all information and statements on the application are true and correct and I/we hereby apply for a renewal license.

PLEASE NOTE: Neb.Rev.Stat. Section 71-433 requires: Applications shall be signed by

- (1) the owner, if the applicant is an individual or partnership,
- (2) two of its members, if the applicant is a limited liability company,
- (3) two of its officers, if the applicant is a corporation, or
- (4) the head of the governmental unit having jurisdiction over the facility to be licensed, if the applicant is a governmental unit.

Howard Dopenheimer, Executive Vice-President
AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

GAIL HARTMANN, TREASURER
AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

SIGNATURE

2/4/2016
DATE

2/4/2016
DATE

Disclosure of Ownership and Control
Delmar Gardens of Omaha, L.L.C.

PART I - OFFICERS

Name	Address	Title
Gabe Grossberg	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	President
Howard M. Oppenheimer	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Vice President, Secretary
Paul Wentzien	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Assistant Secretary, Chief Financial Officer
Gail Hartmann	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Treasurer

Part II - BOARD OF MANAGERS

Name	Address	Title
Delmar Gardens Management Services, Inc.	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Manager

Part III - MEMBER

Name	Address	Percentage of Interest Held
Delmar Gardens Enterprises, Inc.	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	100% EIN: .. - (636) 733-7000

Disclosure of Ownership and Control
Nebraska Retirement Services, Inc.

PART I - OFFICERS

Name	Address	Title
Gabe Grossberg	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	President
Howard M. Oppenheimer	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Vice President, Secretary
Paul Wentzien	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Assistant Secretary, Chief Financial Officer
Gail Hartmann	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Treasurer

Part II - BOARD OF DIRECTORS

Name	Address	Title
Gabe Grossberg	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Director
Howard M. Oppenheimer	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Director

Part III - STOCKHOLDERS

Name	Address	Percentage of Interest Held
Delmar Gardens Enterprises, Inc.	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	100% EIN: (636) 733-7000

Delmar Gardens Enterprises, Inc.
Single Member of Delmar Gardens of Omaha, L.L.C.
100% Stockholder of Nebraska Retirement Services, Inc.

PART I - OFFICERS

Name	Address	Title
Gabe Grossberg	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	President/Chief Executive Officer
Howard M. Oppenheimer	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Secretary, Executive Vice President
Paul Wentzien	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Assistant Secretary, Chief Financial Officer, Vice- Chairman of the Board
Gail Hartmann	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Treasurer, Reimbursement Specialist

Part II - DIRECTORS

Name	Address	Title
Gabe Grossberg	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Director
Howard M. Oppenheimer	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Director
Paul Wentzien	14805 North Outer 40 Rd, Suite 300, Chesterfield, MO 63017-6060	Director

Delmar Gardens Enterprises, Inc.
Single Member of Delmar Gardens of Omaha, L.L.C.
100% Stockholder of Nebraska Retirement Services, Inc.

Part III - STOCKHOLDERS

Individuals Names	Address	Percentage of Ownership
Gabe Grossberg	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	16.3306%
George Grossberg	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	11.3306%
Diane G. Fredman	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	4.2649%
Harry Zvi Goldberg	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	4.2649%
Janice G. Bitansky	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	4.2649%
Trusts and Other Legal Business Names	Address	Percentage of Ownership
George Grossberg, Trustee of the Barbara Grossberg GST and Non-GST Trusts FBO George Grossberg dated March 15, 2007	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	3.125000%
Gabe Grossberg, Trustee of the Barbara Grossberg GST and Non-GST Trusts FBO Gabe Grossberg dated March 15, 2007	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	3.125000%
George Grossberg and Gabe Grossberg, Trustees of the Henry and Barbara Grossberg Irrevocable Trust FBO George Grossberg and Descendants dated January 8, 1997	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	8.0444%
Gabe Grossberg and George Grossberg, Trustees of the Henry and Barbara Grossberg Irrevocable Trust FBO Gabe Grossberg and Descendants dated January 8, 1997	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	8.0444%
Howard M. Oppenheimer, Trustee and Jaclyn F. Oppenheimer, Trustee of The Oppenheimer Living Trust dated 12/30/2008	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	2.9820%
Yetra Goldberg Revocable Trust (Howard M. Oppenheimer and Diane G. Fredman, Trustees)	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	1.0054%
Goldberg-Nom, LLC	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	25.0000%
Diane G. Fredman and Howard M. Oppenheimer, Trustees of the Yetra Goldberg 1996 Irrevocable Generation-Skipping Trust FBO Diane G. Fredman and Descendants dated July 5, 1996	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	2.7393%
Diane G. Fredman and Howard M. Oppenheimer, Trustees of the Yetra Goldberg 1996 Irrevocable Generation-Skipping Trust FBO Harry Zvi Goldberg and Descendants dated July 5, 1996	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	2.7393%
Diane G. Fredman and Howard M. Oppenheimer, Trustees of the Yetra Goldberg 1996 Irrevocable Generation-Skipping Trust FBO Janice G. Bitansky and Descendants dated July 5, 1996	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	2.7393%

Delmar Gardens Enterprises, Inc.
Single Member of Delmar Gardens of Omaha, L.L.C.
100% Stockholder of Nebraska Retirement Services, Inc.
Part III - STOCKHOLDERS (continued)

Goldberg-Nom, LLC		
Non-GST Family Trust established u/w of Israel Goldberg FBO Janice Bitanski dated July 20, 1987 TIN:	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	5.7128%
Non-GST Family Trust established u/w of Israel Goldberg FBO Diane Fredman dated July 20, 1987 TIN:	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	5.7127%
Non-GST Family Trust established u/w of Israel Goldberg FBO Harry Zvi Goldberg dated July 20, 1987 TIN:	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	5.7127%
Generation-Skipping Residuary Trust under the Will of Israel Goldberg FBO Harry Zvi Goldberg dated July 20, 1987 TIN:	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	2.6206%
Generation-Skipping Residuary Trust under the Will of Israel Goldberg FBO Janice B. Bitansky dated July 20, 1987 TIN:	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	2.6206%
Generation-Skipping Residuary Trust under the Will of Israel Goldberg F Diane G. Fredman dated July 20, 1987 TIN:	14805 N. Outer 40 Rd., Ste. 300, Chesterfield, MO 63017	2.6206%

7/22/15

Alzheimer's Special Care Unit

PURPOSE

Long-term care facilities which provide or offer to provide care for persons with Alzheimer's disease by means of a special care unit or program are required to disclose information by the Alzheimer's Special Care Disclosure Act.

IDENTIFYING INFORMATION (PLEASE TYPE OR PRINT)

FACILITY NAME St. Joseph Villa Nursing Center		TELEPHONE NUMBER (402) 345-5683	
ADDRESS 2305 South 10th Street		TYPE OF LICENSE skilled	
CITY Omaha	STATE NE	ZIP CODE 68108-1154	UNIT CAPACITY 24
PERSON IN CHARGE OF PROGRAM OVERSIGHT Mary Smith, Director of Nursing			

PROGRAM PHILOSOPHY

BRIEFLY DESCRIBE THE PHILOSOPHY OF THE SPECIAL CARE PROGRAM.

The philosophy of the St. Joseph Villa "Specialized Care Unit" is the promotion of a comfortable, home-like environment for residents afflicted with Alzheimer's Disease and other similar dementias. The unit is designed to ensure dignity, to encourage independence and to enhance quality of life. Our staff are committed to the Delmar Gardens Family tradition of Love, Care and Understanding.

ADMISSION & DISCHARGE INFORMATION

ITEMS IN THE CHECKLIST ARE CHARACTERISTICS OF SOME SPECIAL CARE PROGRAMS AND DO NOT NECESSARILY REPRESENT REGULATORY REQUIREMENTS.

A. CHECK THE FOLLOWING ADMISSIONS CRITERIA AND PROCEDURES THAT APPLY TO THE SPECIAL CARE PROGRAM:

- Medical Confirmation of Alzheimer's or Related Dementia
- Pre-admission Family Interview
- Tour of the Special Care Program, Explanation of Unique Features
- Pre-admission Observation
- Additional Admission Criteria (include any other diagnostic or functional capacity requirements; ability to ambulate, etc.)

Residents admitted to division are ambulatory

B. CHECK THE FOLLOWING DISCHARGE AND/OR TRANSFER CRITERIA AND THAT APPLY TO RESIDENTS IN THE PROGRAM:

- No Longer Ambulatory
- Specialized Nursing Procedures Required
- Unable to Feed Self
- Unable to Benefit from Therapeutic Programming
- Additional Criteria:

C. DESCRIBE ANY SPECIALIZED SERVICES AVAILABLE TO ASSIST WITH TRANSFER AND DISCHARGE PLANNING FOR SPECIAL PROGRAM PARTICIPANTS:

Services included are on-site Social Worker and when necessary referrals to other mental health

and geriatric specialist.

ASSESSMENT

A. DESCRIBE HOW THE PROCESS FOR EVALUATING SPECIAL CARE PROGRAM PARTICIPANTS AND DEVELOPING A PLAN OF CARE MAY DIFFER FROM PROCEDURES FOLLOWED ELSEWHERE IN THE FACILITY.

History or assessed risk or wandering out of facility, resident/ or decision maker interviewed prior to

offering placement, consent of decision maker to be in secure unit, behaviors to be managed by

interdisciplinary team with interventions care-planned.

Resident's assessment includes any dementia dx. History of wandering, attempts at elopement, and/or exit

seeking with poor safety awareness. Communication deficits also to be indentified and indicated in the

plan of care with interventions included. Potential for more frequent family participation in the

Care Planning Process.

B. EXPLAIN HOW THE FACILITY ENSURES THAT STAFF GARRY OUT THE PLAN FOR SPECIAL CARE PROGRAM PARTICIPANTS AND HOW THE PLAN OF CARE CHANGES IN RESPONSE TO THE PARTICIPANT'S CONDITION.

Staff are included in the Plan of Care by answering direct questions and providing input regarding resident

care needs. Plan of Care approaches are transferred to assignment sheets and by daily reports and each

shift to staff. Ongoing needs of the residents are discussed daily, quarterly during care plans and as

needed, the Plan of Care is updated with new approaches as needed. Residents no longer at risk for

wandering, and/or requiring 2 staff for assist with ADLs and tranfers will be assessed for placement

outside of the Specialized Care Unit.

STAFF TRAINING

A. DO STAFF WHO WORK WITH THE SPECIAL CARE PROGRAM RECEIVE SPECIALIZED TRAINING NOT PROVIDED TO STAFF IN THE REST OF THE FACILITY?

YES NO

B. IF SO, INDICATE HOW MANY HOURS ANNUALLY (HOURS PER YEAR) SPECIALIZED TRAINING BY TYPE OF STAFF.

RN's & L.P.N.s: 4 C.N.A.s: 12 SUPPORT: 1 VOLUNTEERS:

C. LIST THE TOPICS OF THIS SPECIALIZED TRAINING PROVIDED TO STAFF IN THE SPECIAL CARE UNIT:

RN-LPN Medication Inservices; focused on psychotropic drug usage, antianxieties, antidepressants, assessment

skills for confused residents.. Bowel and Bladder training program. Management of residents with psychotic

disorders. CNA Validation Therapy; communicating with the resident; speech and sensory loss of the

elderly; preserving resident's dignity. A variety of topics available to nurses are also open to CNAs.

CNA Dementia Training; is open to all staff. The Specialized Care Unit nurse is reponsible to provide

ongoing education in standards of practice in dementia care.

PHYSICAL ENVIRONMENT & RESIDENT SAFETY

ITEMS IN THE CHECKLIST BELOW ARE CHARACTERISTICS OF SOME SPECIAL CARE PROGRAMS AND DO NOT NECESSARILY REPRESENT REGULATORY REQUIREMENTS.

Indicate any of the program's physical design and security features designed to safeguard individuals with Alzheimer's and dementia and enhance their lives:

- Door Alarms
- Wander Guard
- Enclosed Courtyard
- Door Locks
- Lockout Elevators

OTHER FEATURES:

Residents are allowed to be outdoors in safe environment with an enclosed courtyard. Smaller unit with only 24 possible residents - less if private rooms. Closed by double doors from other units.

Dining Room on Unit.

RESIDENT ACTIVITIES

LIST THE TYPES AND FREQUENCY OF ACTIVITIES OFFERED BY THE SPECIAL CARE PROGRAM, WHICH ARE DIFFERENT THAN THOSE OFFERED IN THE REST OF THE FACILITY:

Calendars are planned specifically for the residents on the Specialized Division. Such as music, pet therapy, balloon volleyball, games, baking and crafts, etc. We provide over learned activities that provide opportunities for success and allows targeting the asset of procedural memory, enhances individual self-esteem by supporting competence in daily routines. allows for the development of an integrated, interdisciplinary approach to care.

FAMILY INVOLVEMENT

ITEMS IN THE CHECKLIST BELOW ARE CHARACTERISTICS OF SOME SPECIAL CARE PROGRAMS AND DO NOT NECESSARILY REPRESENT REGULATORY REQUIREMENTS.

Indicate those features available to family members of residents in the program:

- Alzheimer's Family Support Group
- Support Staff Assigned to Work with Family Members
- Respite Care
- Educational Materials on Alzheimer's and Other Dementia's

OTHER FEATURES:

PROGRAM COSTS

A. HOW DOES THE COST FOR PARTICIPANTS IN THE SPECIAL CARE PROGRAM DIFFER FROM THE COST FOR OTHER RESIDENTS IN THE FACILITY?

Our rate for the Specialized Care Unit is \$5 per day greater for a semi-private room as compared to other residents.

B. IF THERE IS AN ADDITIONAL COST FOR PARTICIPANTS IN THE SPECIAL CARE PROGRAM, WHAT ADDITIONAL SERVICES ARE PROVIDED?

Higher ratio of staff to residents
Specialized activities.

C. PLEASE INDICATE ANY OTHER OPTIONAL SERVICES AVAILABLE ONLY TO SPECIAL CARE PROGRAM PARTICIPANTS AT AN ADDITIONAL COST.

N/A

D. DOES THE FACILITY HAVE DESIGNATED MEDICAID BEDS AVAILABLE IN THE SPECIAL CARE PROGRAM?

YES . . NO

NEBRASKA STATE FIRE MARSHAL

OCCUPANCY PERMIT

Certificate Number: 403090

Name of Facility: **St. Joseph Villa Nursing Center**

Type of Facility: **Nursing Home**

Location: **2305 S. 10th St., Omaha**

Maximum
Occupancy: **184 Beds**

Date Issued: **7/22/2015**

Approved By:

Inspected By: **8725 Susen Lindner**
Deputy State Fire Marshal

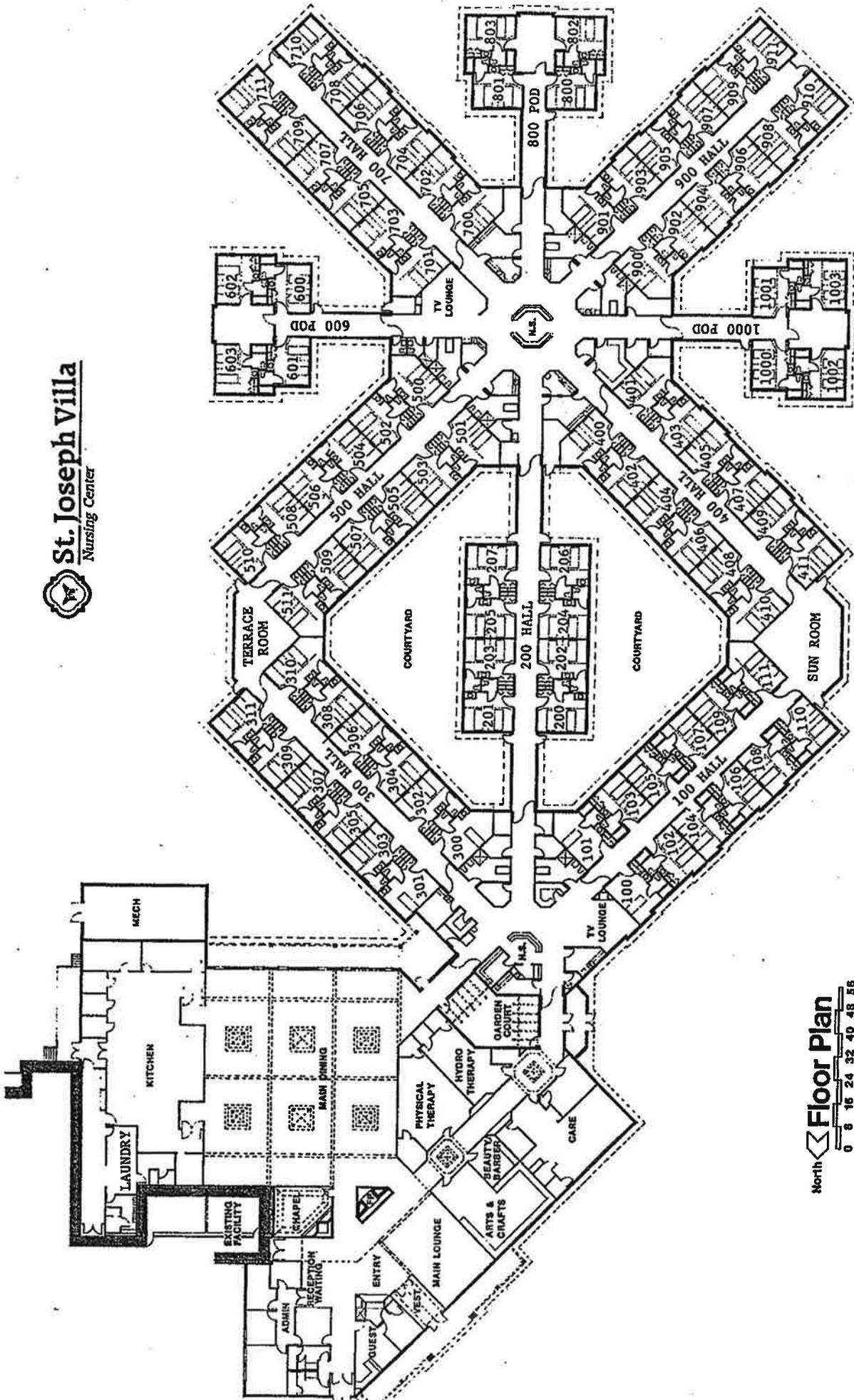
State Fire Marshal



POST IN PROMINENT PLACE

Change in occupancy classification or failure to meet State Fire Marshal codes shall invalidate this occupancy permit.

St. Joseph Villa
Nursing Center



North  **Floor Plan**
0 8 16 24 32 40 48 56

St. Joseph Villa Nursing Center
 2305 South 10th Street
 Omaha, NE 68108-1154

Bed Count

Room Identification			Medicare	Medicaid
Hall	Room Number	Number of Beds		
100	100-111	2 each room (24)		24
200	200-207	2 each room (16)		16
300	300-411	2 each room (24)		24
400	400-411	2 each room (24)		24
500	500-511	2 each room (24)		24
600 POD	600-603	2 each room (8)		8
700	700-711	2 each room (24)		24
800 POD	800-803	2 each room (8)	8	8
900	900-911	2 each room (24)	24	24
1000 POD	1000-1003	2 each room (8)		8
TOTAL			32	184