STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	205020	A. BUILDING _____ B. WING _____	C 06/12/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BANGOR NURSING & REHABILITATION CENTER	**103 TEXAS AVE BANGOR, ME 04401**

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F 000	INITIAL COMMENTS On 6/11/24 through 6/12/24, an unannounced on-site visit was conducted at Bangor Nursing and Rehabilitation Center for the purpose of investigating complaints #ME00046140, #ME00046505, and #ME00047620. It was determined that Bangor Nursing and Rehabilitation Center was not in substantial compliance with 42 CFR Part 483, Subpart B, Requirements for Long Term Care Facilities.	F 000		
F 550 SS=D	Resident Rights/Exercise of Rights CFR(s): 483.10(a)(1)(2)(b)(1)(2) §483.10(a) Resident Rights. The resident has a right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility, including those specified in this section. §483.10(a)(1) A facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's individuality. The facility must protect and promote the rights of the resident. §483.10(a)(2) The facility must provide equal access to quality care regardless of diagnosis, severity of condition, or payment source. A facility must establish and maintain identical policies and practices regarding transfer, discharge, and the provision of services under the State plan for all residents regardless of payment source. §483.10(b) Exercise of Rights. The resident has the right to exercise his or her	F 550		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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.

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F 550	Continued From page 1	F 550		

rights as a resident of the facility and as a citizen or resident of the United States.

§483.10(b)(1) The facility must ensure that the resident can exercise his or her rights without interference, coercion, discrimination, or reprisal from the facility.

§483.10(b)(2) The resident has the right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights and to be supported by the facility in the exercise of his or her rights as required under this subpart.
This REQUIREMENT is not met as evidenced by:
Based on interviews and record review the facility failed to promote care for residents in a manner that maintains each resident's dignity and respect when staff attempted to have a resident receive nail care in contrast to their preferences and to disclose a private conversation for 1:1 resident(s) reviewed (Resident #1 [R1]).

Findings:

On 6/11/24 at 12:01 p.m., in an interview with a surveyor, R1 stated he/she was brought into the office and questioned about a private conversation between R1 and Adult Protective Services (APS). R1 stated he/she cried due to fear of being "kicked out" if R1 did not disclose the conversation. R1 also stated not wanting to have their nails trimmed as they are R1's preferred length.

On 6/12/24 review of R1's clinical record indicated the Licensed Social Worker (LSW) spoke with R1 regarding R1's nail care needing

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F 550	Continued From page 2 attention. LSW continues to discuss nail trimming with R1 even after the resident verbalizes refusal for nail trimming. On 6/12/24 at 10:40 a.m., in an interview with a surveyor, the LSW stated she spoke with R1 about nail grooming because an APS representative expressed concerns. The LSW stated she brought R1 into her office after an activity to discuss APS concerns. At this time the surveyor confirmed the resident was brought to the office to discuss R1's visit with APS and to discuss having nails trimmed despite R1's preference.	F 550		
F 684 SS=D	Quality of Care CFR(s): 483.25 § 483.25 Quality of care Quality of care is a fundamental principle that applies to all treatment and care provided to facility residents. Based on the comprehensive assessment of a resident, the facility must ensure that residents receive treatment and care in accordance with professional standards of practice, the comprehensive person-centered care plan, and the residents' choices. This REQUIREMENT is not met as evidenced by: Based on record review and interviews, the facility failed to ensure that physician orders were followed for 1 of 3 residents reviewed for provider orders (Resident #1 [R1]). Findings: On 12/7/24 a provider order was placed in R1's electronic medical record stating "Referral to dentist for dental infection of bilateral posterior	F 684		

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F 684	Continued From page 3 lower gums; [discontinue] this order when completed [or] scheduled." On 4/26/24 a provider instructed a referral be sent for dental services for R1. This order was placed in the paper chart and initialed as acknowledged by staff on 4/29/24 and 4/30/24. On 5/30/24 a provider instructed R1 to have a dental examination for teeth grinding and oral health. On 6/11/24 at 12:01 p.m., in an interview with a surveyor, R1 stated they had not been to a dentist but needed an appointment because a chipped tooth had turned into multiple broken teeth. On 6/11/24 at 12:30 p.m., in an interview with the Scheduler, the surveyor confirmed there were no dental appointments scheduled for R1. This delay in dental services extended over a period of 6 months (December 7, 2023, through June 12, 2024) despite 3 sets of instructions from 2 different providers for a referral to be made. On 6/12/24 at 11:00 a.m., in an interview with the Registered Nurse, a surveyor confirmed the no referrals or appointments were made for R1 as ordered by the providers.	F 684		
F 790 SS=D	Routine/Emergency Dental Srvcs in SNFs CFR(s): 483.55(a)(1)-(5) §483.55 Dental services. The facility must assist residents in obtaining routine and 24-hour emergency dental care. §483.55(a) Skilled Nursing Facilities	F 790		

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F 790	Continued From page 4 A facility- §483.55(a)(1) Must provide or obtain from an outside resource, in accordance with with §483.70(g) of this part, routine and emergency dental services to meet the needs of each resident; §483.55(a)(2) May charge a Medicare resident an additional amount for routine and emergency dental services; §483.55(a)(3) Must have a policy identifying those circumstances when the loss or damage of dentures is the facility's responsibility and may not charge a resident for the loss or damage of dentures determined in accordance with facility policy to be the facility's responsibility; §483.55(a)(4) Must if necessary or if requested, assist the resident; (i) In making appointments; and (ii) By arranging for transportation to and from the dental services location; and §483.55(a)(5) Must promptly, within 3 days, refer residents with lost or damaged dentures for dental services. If a referral does not occur within 3 days, the facility must provide documentation of what they did to ensure the resident could still eat and drink adequately while awaiting dental services and the extenuating circumstances that led to the delay. This REQUIREMENT is not met as evidenced by: Based on record reviews and interviews, the facility failed to obtain dental services for a resident with chipped and broken teeth for 1 of 1 resident reviewed for dental services (Resident	F 790		

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F 790	Continued From page 5 #1 [R1]). Findings: On 6/11/24 at 12:01 p.m., in an interview with a surveyor, R1 stated they had not been to a dentist but needed an appointment because a chipped tooth had turned into multiple broken teeth. At 12:30 p.m., in an interview with the Scheduler, the surveyor confirmed there were no dental appointments scheduled for R1. On 6/12/24, review of R1's clinical record revealed a provider order was placed 12/7/24 in R1's electronic medical record stating "Referral to dentist for dental infection of bilateral posterior lower gums; [discontinue] this order when completed [or] scheduled." Review of the paper chart revealed a second provider wrote instructions for R1 to receive a dental examination for teeth grinding and oral health on 4/26/24 and 5/30/24. Dental services were delayed for a total of six months (December 7th, 2023, through June 12th, 2024). On 6/12/24 at 11:00 a.m., in an interview with the Registered Nurse, a surveyor confirmed that no referrals or appointments were made for R1 to receive dental services.	F 790		