STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255125	A. BUILDING _____ B. WING _____	C 11/13/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CHADWICK NURSING AND REHABILITATION CENTER LLC	1900 CHADWICK DRIVE JACKSON, MS 39204

(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) COMPLETION DATE
F 000	INITIAL COMMENTS The State Agency (SA) conducted a Complaint Investigation (CI), MS #23119 at the facility from 11/09/23 through 11/13/23. MS #23119 was investigated related to Safety/Falls, Notification of Resident Representative (RR), Medications Improperly Administered, Client Services not performed per Plan of Care or Physician Orders, per Physician Instructions, Adequate Grooming, Staffing and Resident Abuse/Verbal. During the survey, the SA determined that the facility was not in compliance with the requirements for participation in Medicare and Medicaid. No deficient practice was determined related to the complaints, however, the SA determined that medications were not securely stored in a locked compartment within a medication cart and cited F761. The census at the time of the survey was 98 with a bed capacity of 102.	F 000		
F 761 SS=D	Label/Store Drugs and Biologicals CFR(s): 483.45(g)(h)(1)(2) §483.45(g) Labeling of Drugs and Biologicals Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable. §483.45(h) Storage of Drugs and Biologicals §483.45(h)(1) In accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments under proper temperature controls, and permit only authorized	F 761		12/15/23

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

Electronically Signed | 12/01/2023

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F 761	Continued From page 1 personnel to have access to the keys. §483.45(h)(2) The facility must provide separately locked, permanently affixed compartments for storage of controlled drugs listed in Schedule II of the Comprehensive Drug Abuse Prevention and Control Act of 1976 and other drugs subject to abuse, except when the facility uses single unit package drug distribution systems in which the quantity stored is minimal and a missing dose can be readily detected. This REQUIREMENT is not met as evidenced by: Based on observation, facility policy review and staff interviews the facility failed to provide safe and secure storage of medications for one (1) of three (3) medications carts observed. Findings Include: Record review of the facility provided "Medication Administration-General Guidelines" dated 8/16, revealed, ..." 4. Medications are administered at the time they are prepared for each resident. Medications are not pre-poured ...16 ... No medications are left unattended on top of the cart. The cart is to be locked if not clearly visible and under the control of the personnel administering medications ..." On 11/09/23 at 8:20 AM, an observation revealed the medication cart outside room 102 was unattended, unlocked, and had three medication packets, containing four pills lying on top of the medication cart. There were no residents in the hallway. The medication packets lying on top of the medication cart were labeled "Divalproex Sprinkles mcg (micrograms) 2 CAPSULES, Losartan 50 MG (milligrams) one (1) TABLET,	F 761	1. On November 14, 2023 LPN #1 was in-service on providing safe and secure storage of medications which includes to keep unattended medication cart locked and no medications left unattended on top of the cart. 2. All residents who receive medication have the potential to be affected from this deficient practice. 3. An in-service was initiated on November 14, 2023 by the Staff Development Coordinator (SDC) for all Licensed Practical Nurses (LPN) and Registered Nurses (RN) on providing safe and secure storage of medications which includes to keep unattended medication cart locked	

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F 761	Continued From page 2 Olanzapine 7.5 MG one (1) CAPSULE". On 11/09/23 at 8:24 AM, an interview with Licensed Practical Nurse (LPN) #1 she stated she had gone into a resident's room to obtain their vital signs and left the medication cart unattended and unlocked with a Resident's medications lying on top of the cart. LPN #1 confirmed that the medications should not have been left out on top of the cart but had no explanation; she stated, "I just went to get the vital signs." On 11/09/23 at 8:35 AM, during an interview with the Director of Nurses (DON), she stated that medication carts were never to be left unattended and unlocked and that medications were never to be left on top of an unattended medication cart. The DON confirmed that the medications were not appropriately stored or secured. She stated that the facility policy was that all medications were to be stored and secured in a locked medication cart or medication room. The DON commented that medication errors could result from unsecured medications if a resident were to take the unsecured medication. On 11/09/23 at 12:00 PM, an interview with the Administrator revealed that nurses were expected to secure all medications and that leaving medications lying on top of an unattended, unlocked medication cart did not secure medications.	F 761	and no medications left unattended on top of the medication cart. 4. Starting on November 20, 2023 the Unit Manager audited three (3) medication carts a day for five (5) times a week for eight (8) weeks to ensure that medication is stored securely in medication carts which includes to keep unattended medication cart locked and no medications left unattended on top of the medication cart. Any concerns noted by the Unit Manager are reported to the Interim Director of Nursing (IDNS). The IDNS will immediately address safe and secure storage of medications. The IDNS will forward the results on safe and secure medication audits to the Quality Assurance Committee monthly times two (2) starting with the Quality Assurance Committee meeting on December 15, 2023.	