MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	17SH	A. BUILDING: _____ B. WING _____	C 11/02/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DIVERSICARE OF SOUTHAVEN	1730 DORCHESTER DR SOUTHAVEN, MS 38671

(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
M 000	Initial Comments The State Agency (SA) conducted an annual recertification survey and a complaint investigation (CI) MS #22673 at the facility from 10/30/23 through 11/2/23. During the survey, the SA determined the facility was not in compliance with the Minimum Standards of Operation for Institutions of Aged or Infirm, state licensure requirements and deficiencies were cited at M625,M935,and M1570. The SA determined that the facility was not in compliance related to CI MS #22673 related to enviroment and Activities of Daily Living and cited M610. The facility held a license for 140 beds at the time of the survey, and the facility census was 125.	M 000		
M 610	45.21.2 Activities of daily living Activities of daily living. Each resident shall receive assistance as needed with activities of daily living to maintain the highest practicable well being. These shall include, but not be limited to: 1. Bath, dressing and grooming; 2. Transfer and ambulate; 3. Good nutrition, personal and oral hygiene; and 4. Toileting. This Statute is not met as evidenced by: Level II Based on observation, staff, resident and responsible party interview, and facility policy review the facility failed to provide activities of daily living (ADL) care, shaving, for two (2) of 125 residents reviewed on initial tour. Resident #90	M 610	1. Resident #90 was shaved by his certified nursing assistant on 11/1/2023. On November 8th Resident□s #90 care plan was updated to reflect shaving. This resident was assessed by the Director of Nursing on 11/1/2023 and confirmed there were no negative effects of this deficient	11/27/23

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M 610	Continued From page 1 and Resident #173 Findings include: Review of the facility policy title, "Activities of Daily Living (ADLs)", undated, revealed the facility will, based on the the resident's comprehensive assessment and consistent with the resident's needs and choices, ensure a resident's abilities in ADL's do not deteriorate unless deterioration is unavoidable. The policy explanation and guidelines include a resident who is unable to carry out activities of daily living will receive the necessary services to maintain good nutrition, grooming, and personal and oral hygiene. Resident #90 An observation on 10/30/23 at 11:25 AM revealed Resident #90 in wheelchair with a hard cervical collar in place and noted a long beard. Resident stated he wants to be shaved. He stated that he tried to do it himself last week but just couldn't. An observation and interview, on 10/31/23 at 4:38 PM with Resident #90 and Licensed Practical Nurse (LPN) #1 confirmed the resident stated he wants to be shaved. Resident #90 stated he tried his best about a week ago to do it himself but just couldn't. LPN #1 told the resident he didn't have to do that because the staff should do that. An interview, on 11/1/23 at 11:30 AM with CNA #4 revealed that she was assigned to Resident #90 this morning. She stated that residents should be shaved on their shower days or as needed unless they refuse. She stated that when she saw Resident #90 this morning the hair on his face was ridiculous. She stated that she shaved him first thing this morning.	M 610	practice. Resident #173 was discharged from facility on 10/31/23 and we were unable to update his plan of care. 2. All residents who require assistance with shaving have the potential to be affected by this deficient practice. All residents were checked by the Unit Manager on 11/3/2023 to ensure if they needed shaved or assistance with shaving assistance, it was provided. 3. To ensure the deficient practice does not recur, on 11/6/2023 the Director of Clinical Education provided an in-service for all nursing staff on ensuring all residents who require assistance with shaving are shaved in accordance with the care plan. 4. To monitor the performance of our corrective action and to ensure sustainability, the Unit Manager or Charge Nurse will conduct Audits 5 days a week for eight (8) weeks and then weekly for 4 weeks starting 11/6/2023 to ensure that the residents who require shaving are shaved. Findings of audits will be addressed in Quality Assurance and Performance Improvement Committee meeting for a minimum of three months by the Nursing Home Administrator for review and interventions as necessary beginning with November Quality Assurance Performance Improvement Committee Meeting on 11/27/2023.	

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M 610	Continued From page 2 Review of the Admission Record resident information form revealed Resident #90 was admitted to the facility on 5/26/23 with diagnoses that included Hemiplegia and Hemiparesis following Cerebral Infarction affecting left dominate side, Anxiety disorder, Restlessness and Agitation, and Anemia. Review of the quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 8/29/23 revealed a Brief Review for Mental Status (BIMS) score of 12 which indicated Resident #90 had moderate cognitive impairment. Resident #173 An observation, on 10/30/23 at 01:20 PM revealed Resident #173 in bed, verbally unresponsive. Resident #173's wife was at the bedside. She stated they are good to bathe him, but he has not been shaved since he was admitted on 10/17/23. She stated the staff had not offered to shave him. Resident #173's wife stated he does wear a moustache but always shaved his face. An interview, on 10/31/23 at 8:15 AM with the Director of Nursing (DON) revealed the staff should offer to shave residents, and if they want to be shaved, they should do it. He stated that this was part of the resident's daily care. The DON stated all residents should be shaved if needed. An interview, on 11/01/23 at 11:29 AM with Certified Nursing Assistant (CNA) #1 revealed when they give the residents a bath or shower, they should shave them if they have hair on their face.	M 610		

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M 610	Continued From page 3 Review of the Admission Record resident information form revealed Resident #173 was admitted to the facility on 10/17/23 with diagnoses that included Essential Hypertension, Acute Embolism and Thrombosis of Unspecified Deep Veins of left lower extremity, Cognitive Communication Deficit, and Diabetes Mellitus Type 2.	M 610		