STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255164	A. BUILDING _____ B. WING _____	01/25/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JEFFERSON COUNTY NURSING HOME	910 MAIN STREET FAYETTE, MS 39069

(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 an annual recertification survey along with two (2) Complaint Investigations (CI MS #23613 and CI MS #23794) at the facility from 01/23/24 through 01/25/23. The SA investigated CI MS #23613 for neglect of pressure wounds and there were no citations related to the CI. The SA investigated CI MS #23794 for abuse and misappropriation of property and cited F602 and F610. During the survey, the SA determined the facility was not in compliance with the requirements of participation in Medicare and Medicaid and cited F700. The facility held a license for 60 beds, with a census of 46.	F 000		
F 700 SS=E	Bedrails CFR(s): 483.25(n)(1)-(4) §483.25(n) Bed Rails. The facility must attempt to use appropriate alternatives prior to installing a side or bed rail. If a bed or side rail is used, the facility must ensure correct installation, use, and maintenance of bed rails, including but not limited to the following elements. §483.25(n)(1) Assess the resident for risk of entrapment from bed rails prior to installation. §483.25(n)(2) Review the risks and benefits of bed rails with the resident or resident representative and obtain informed consent prior to installation. §483.25(n)(3) Ensure that the bed's dimensions are appropriate for the resident's size and weight.	F 700		3/1/24

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

Electronically Signed | 02/09/2024

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F 700	Continued From page 1 §483.25(n)(4) Follow the manufacturers' recommendations and specifications for installing and maintaining bed rails. This REQUIREMENT is not met as evidenced by: Based on observation, staff interview, record review and service manual review the facility failed to assess residents for the risk of entrapment, obtain informed consent, and conduct routine preventative maintenance per the manufacturer's recommendations/specifications for bed rails for five (5) of fourteen (14) sampled residents. (Resident #4, #6, #28, #29 and #39) Findings Include: Observations of resident rooms on 1/23/24 from 10:00 AM to 12:17 PM, revealed Residents #4, #6, #28, #29, and #39 had beds that were the brand name of Basic American Matrix 709 Matrix II and had bilateral quarter (1/4) length bed rails. Review of the medical record for Residents #4, #6, #28, #29 and #39 revealed there were no resident entrapment risk assessments and no signed informed consent forms for the use of the bed rails. Record review of the "Service Manual for Basic American's Matrix 709 Series", dated 2011, revealed, "... When assessing the risk for entrapment, you need to consider your bed, mattress, head and footboards, half rails, assist bars, and other accessories for an entire system .... A resident/patient's condition could lead to resident patient entrapment. It is extremely important to review the resident patient's physical and mental condition... address any entrapment risk ...Recommended Maintenance & Inspection	F 700	1. On January 24, 2024 the Maintenance Director removed bed rails from Residents #4, #6, #28, #29, and #39 beds as well all other bed rails. The Maintenance Director reviewed the Service Manual for Basic American Matrix 709 Series and started a Maintenance Log to monitor bed rails. On January 24, 2024 the Director of Nursing delegated to the Medical Records Nurse and the Medical Records Nurse obtained bed rail evaluations, resident or responsible party consents, physician consents, and lastly educated the resident or responsible party on the risks and benefits of bed rails. 2. All residents had the potential to be affected by this deficient practice. 3. On January 24, 2024 the Maintenance Director installed bed rails on Residents beds but none of the affected residents received installation of bed rails on that date. The Maintenance Director listed all residents with bed rails in the Maintenance Log to monitor weekly times three months. Residents will be assessed upon entry into the facility, quarterly, and as needed to determine the need for bed rails and alternatives if deemed necessary. If it is determined that a resident require a bed rail by the MDS Nurse or Director of Nursing bed rail evaluations, resident or responsible party	

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F 700	Continued From page 2 Schedules ...Mechanical inspection of assemblies (6 months) ...Inspect all fasteners for wear and looseness ..." During an interview on 01/24/24 at 11:36 AM, with the Director of Nursing (DON), she confirmed there were side rails on most of the beds in the facility. She stated they were not used as a restraint, and there were no consents signed by the resident or the resident representative (RR) for the use of bedrails. During an interview on 01/24/24 at 2:03 PM, with Maintenance Director #1, he stated that he checked bed rails if someone complained about them. He confirmed there was no maintenance schedule to check the bed rails periodically. An interview on 01/25/24 at 11:36 AM, with the Administrator, revealed bed rails were used in the facility and there was no maintenance plan regarding checking the bed rails. Resident #4 Record review of the "Face Sheet" revealed the facility admitted Resident #4 on 4/26/22 and had current medical diagnoses including Atherosclerotic Heart Disease and Hypertension. Record Review of the Quarterly Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 10/21/23 revealed Resident #4 had a Brief Interview for Mental Status (BIMS) score of 11 which indicated her cognition was moderately impaired. Resident #6	F 700	consent, physician consent, and education to the resident or responsible party on the risks and benefits of bed rails will be obtained. 4. The Administrator and Director of Nursing began monitoring on 01/30/2024 the assessment and will continue every month for two months for the first quarter for assessments. The Administrator and Director of Nursing began reviewing the Maintenance Log on 01/30/2024 and will continue monitoring weekly times two months to ensure inspections are completed. If there are any findings they will be presented to the Quality Assurance Performance Improvement Committee and the plan of correction will continue on an ongoing basis for two months. The findings will be reviewed by the Quality Assurance Improvement Committee on 02/29/2024 and the next two Quality Assurance Improvement Performance Committee meetings times two months for review and suggestions should there be any to maintain substantial compliance. If there are no findings, weekly review of the Maintenance Log may be discontinued in sixty days.	

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F 700	Continued From page 3	F 700		

Record review of the "Face Sheet" revealed the facility admitted Resident #6 on 07/08/05 and had current medical diagnoses including Osteoarthritis.

Record review of the Admission MDS, with an ARD of 12/12/23, revealed Resident #6 required a staff interview to assess cognition and her cognition skill for daily decision making was severely impaired.

Resident #28

Record review of the "Face Sheet" revealed the facility admitted Resident #28 on 08/28/23 and he had current medical diagnoses including Type 2 Diabetes Mellitus, Hypertension, and Peripheral Vascular Disease.

Record review of the Quarterly MDS with an ARD of 11/28/23 revealed Resident #28 had a BIMS score of 6 which indicated his cognition was severely impaired.

Resident #29

Record review of the "Face Sheet" revealed the facility admitted Resident #29 on 10/25/22 and had current medical diagnoses including Type 2 Diabetes Mellitus.

Record review of the Annual MDS with an ARD of 10/20/23, revealed Resident #29 had a BIMS score of 14 which indicated he was cognitively intact.

Resident #39

A record review of the "Face Sheet" revealed the

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F 700	Continued From page 4 facility admitted Resident #39 on 8/11/23 with current medical diagnoses including Hemiplegia following Cerebral Infarction affecting left dominant side. Record review of the Quarterly MDS with an ARD of 11/14/23 revealed Resident #39 had a BIMS score of 14 which indicated he was cognitively intact.	F 700		