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
	46FM	A. BUILDING: _____ B. WING _____	C 02/06/2024

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COLUMBIA REHABILITATION AND HEALTHCARE CEI	1506 NORTH MAIN STREET COLUMBIA, MS 39429

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M 000	Initial Comments The State Agency (SA) conducted three (3) Complaint Investigations (CI MS #23720, MS #23696 and MS #24039), at the facility from 2/05/24 through 2/06/24. CI MS #23720 and CI MS #23696 was investigated related to Sexual Abuse. CI MS #24039 was investigated related to Resident Assessment/Monitoring. During the survey, the SA determined the facility was in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements. Based on the facility's implementation of corrective actions completed by 12/20/23, the SA determined the deficiency related to CI MS #23720 and CI MS #23696 to be Past Non-Compliance (PNC) and M500 was cited. The deficiency was corrected as of 12/21/23, prior to the SA's entrance on 2/5/24. There were no citations related to CI MS #24039.	M 000		
M 500	45.17.2 Residents' Rights Residents' Rights. The residents' rights policies and procedures ensure that each resident admitted to the facility: 1. is fully informed, as evidenced by the resident's written acknowledgment, prior to or at the time of admission and during stay, of these rights and is given a statement of the facility's rules and regulations and an explanation of the resident's responsibility to obey all reasonable regulations of the facility and to respect the personal rights and private property of other residents; 2. is fully informed, and is given a written statement prior to or at time of admission and during stay, of services available in the facility, and of related charges including any charges for services covered by the facility's basic per diem	M 500		2/23/24

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M 500	Continued From page 1 rate; 3. is assured of adequate and appropriate medical care, is fully informed by a physician or nurse practitioner/physician assistant of his medical conditions unless medically contraindicated (as documented by a physician or nurse practitioner/physician assistant in his medical record), is afforded the opportunity to participate in the planning of his medical treatment, to not be limited in his/her choice of a pharmacy or pharmacist provider in accordance with state law, as referenced in House Bill 1439, which states that the facility shall not limit a resident ' s choice of pharmacy or pharmacy provider if that provider meets the same standards of dispensing guidelines required of long term care facilities, to refuse to participate in experimental research, and to refuse medication and treatment after fully informed of and understanding the consequences of such action; 4. is transferred or discharged only for medical reasons, or for his welfare or that of other residents, or for nonpayment for his stay (except as prohibited by sources of third-party payment), and is given a two weeks advance notice in writing to ensure orderly transfer or discharge. A copy of this notice is maintained in his medical record; 5. is encouraged and assisted, throughout his period of stay, to exercise his rights as a resident and as a citizen, and to this end may voice grievances, has a right of action for damages or other relief for deprivations or infringements of his right to adequate and proper treatment and care established by an applicable statute, rule, regulation or contract, and to recommend	M 500		

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changes in policies and services to facility staff and/or to outside representatives of his choice, free from restraint, interference, coercion, discrimination, or reprisal;

6. may manage his personal financial affairs, or is given at least a quarterly accounting of financial transactions made on his behalf should the facility accept his written delegation of this responsibility to the facility for any period of time in conformance with State law;

7. is free from mental and physical abuse;
8. is free from restraint except by order of a physician or nurse practitioner/physician assistant, or unless it is determined that the resident is a threat to himself or to others. Physical and chemical restraints shall be used for medical conditions that warrant the use of a restraint. Restraint is not to be used for discipline or staff convenience. The facility must have policies and procedures addressing the use and monitoring of restraint. A physician order for restraint must be countersigned within 24 hours of the emergency application of the restraint;
9. is assured security in storing personal possessions and confidential treatment of his personal and medical records, and may approve or refuse their release to any individual outside the facility, except, in the case of his transfer to another health care institution, or as required by law of third-party payment contract;

10. is treated with consideration, respect, and full recognition of his dignity and individuality, including privacy in treatment and in care for his personal needs;

11. is not required to perform services for the

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M 500	Continued From page 3 facility that are not included for therapeutic purposes in his plan of care; 12. may associate and communicate privately with persons of his choice, may join with other residents or individuals within or outside of the facility to work for improvements in resident care, and send and receive his personal mail unopened, unless medically contraindicated (as documented by his physician or nurse practitioner/physician assistant in his medical record); 13. may meet with, and participate in activities of, social, religious and community groups at his discretion, unless medically contraindicated (as documented by his physician or nurse practitioner/physician assistant in his medical record); 14. may retain and use his personal clothing and possessions as space permits, unless to do so would infringe upon rights of other residents, unless medically contraindicated (as documented by his physician or nurse practitioner/physician assistant in his medical record); 15. if married, is assured privacy for visits by his/her spouse; if both are inpatients in the facility, they are permitted to share a room, unless medically contraindicated (as documented by the attending physician or nurse practitioner/physician assistant in the medical record); and 16. is assured of exercising his civil and religious liberties including the right to independent personal decisions and knowledge of available choice. The facility shall encourage and assist in	M 500		

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M 500	Continued From page 4 the fullest exercise of these rights. This Statute is not met as evidenced by: Level II Based on interview, record review, facility investigation, and policy review the facility failed to ensure a resident was protected from sexual harassment/sexual abuse for one (1) of four (4) residents sampled. Resident #1 Findings include: A review of the facility's policy, "Abuse Prohibition Policy," revised 11/7/2023, revealed, INTENT:...Each resident has the right to be free from abuse, mistreatment ... DEFINITIONS: Sexual abuse includes, but is not limited to rape, sexual harassment, sexual coercion or sexual assault ... Identification: 1. Any allegations of abuse/neglect, made by residents/staff/visitors shall be reported to the Abuse Coordinator and investigated immediately ...Investigation: 1. The facility will thoroughly investigate all alleged violations and take appropriate actions ..." Record review of the Facility Investigation with an initiation date of 11/26/23 revealed that on 11/26/23, Certified Nurse Aide (CNA) #2 reported that CNA #1 had made unwanted, inappropriate sexually, explicit suggestions toward her. The facility had initiated an investigation that included reports that CNA #1 had been asking female CNAs for their telephone numbers. The Disciplinary Action Record dated 11/26/23, signed by CNA #1 revealed a written counseling was provided by the Administrator, Director of Nurses (DON) and Assistant Director of Nurses (ADON). As part of the investigation related to the actions of CNA #1, the ADON conducted "Life	M 500	No POC needed(Past noncompliance)	

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Satisfaction Rounds" on 12/19/23 and interviewed residents with a Brief Interview for Mental Status (BIMS) score of 13 or higher that received care from CNA #1. The interviews revealed that Resident #1 reported having received inappropriate comments and text messages from CNA #1. A written statement from Resident #1, signed on 12/19/2023, revealed that the resident felt like she had been sexually harassed.

Record review of the "Grievance" report, signed and dated 12/19/23, by the Social Services Director (SSD) revealed Resident #1 initiated a grievance of sexual harassment by CNA #1... 4. Describe the grievance: Resident shows ADON a series of sexually explicit messages received from CNA #1 and reported feeling sexually harassed ... 8. A summary of the pertinent findings and conclusions: CNA #1 already on leave pending investigation of sexual harassment of a CNA ... 10.What corrective action will be taken to prevent recurrence: Assisted Resident (#1) to block his (CNA #1) number of CNA #1 ..."

On 2/05/24 at 12:55 PM, an interview with the SSD revealed that she was made aware of the allegation of sexual abuse of Resident #1 by the ADON on 12/19/23 who presented the resident's personal cellular telephone and showed her messages that CNA #1 had sent to Resident #1. The SSD stated that she interviewed Resident #1 as quickly as possible on 12/19/23 and followed up on 12/20/23. She stated that the resident was without physical, emotional, or psychosocial harm. The SSD stated that Resident stated she was not "bothered" by the text messages but wanted CNA #1 to stop messaging her.

Record review of the printouts of Facebook Messages provided by Resident #1, from her cell

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phone, revealed sexually explicit messages were received from a telephone number provided by CNA #1 as his own.

On 2/05/24 at 4:05 PM, during an interview the Administrator, he confirmed that CNA #1 had been placed on suspension during an investigation involving sexual harassment of CNA #2. He stated that the last day CNA #1 worked at the facility was 12/13/23. As part of the investigation, on 12/19/23, the facility conducted "Life Satisfaction Interviews" with residents that CNA #1 had assisted with their care and during the interviews, Resident #1 reported feeling sexually harassed and had provided sexually explicit messaged received on Facebook Messenger from CNA #1. The Administrator reported that CNA #1 was terminated due to 'Misconduct' on 12/21/24.

On 2/05/24 at 4:20 PM, during an interview with the ADON, she confirmed that on 12/19/23, Resident #1 had reported that CNA #1 had sent inappropriate sexually explicit messages to her that made her feel that she was being sexually harassed. The ADON reported that Resident #1 gave facility administration access to her personal cell phone and the messages were printed. The ADON confirmed that the photograph that accompanied the Facebook Messages received by Resident #1 was that of CNA #1.

On 2/06/24 at 7:53 AM, during a telephone interview the Detective at the local police department (PD), he confirmed that the facility reported an allegation of Resident Abuse of a Vulnerable Adult alleged against CNA #1 by Resident #1. The Detective reported that he had investigated and felt he had enough evidence to substantiate the allegation of sexual harassment

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of a vulnerable adult as defined by the Vulnerable Adult Act. He stated that he had presented his evidence to the local District Attorney and charges were being considered. He said that he considered CNA #1 sexually abusive and stated that he did not believe that CNA #1 should be working with vulnerable adults.

In a post survey telephone interview on 2/07/24 at 2:52 PM, during a telephone interview, CNA #1 stated he was familiar with Resident #1 and stated that he had sent messages to Resident #1 but denied that they were inappropriate and said he couldn't recall when he sent them. CNA #1 confirmed that the telephone number on the Facebook messages received by Resident #1 had been his telephone number but said he no longer had that number.

In a post survey telephone interview on 2/07/24 at 4:48 PM, during a telephone interview with Resident #1, she reported that sexually harassing messages came to her cell phone via Facebook Messager in December of 2023, while she was a resident at the facility. She stated she had not immediately reported the messages because she had not wanted to get CNA #1 in trouble, but when the ADON interviewed her on 12/19/23 she told the ADON and showed the ADON the messages. She stated that she recognized the photograph that accompanied the messages as CNA #1 and said, "I knew it was him". She said she thought it was wrong of CNA #1 to offer her a place to live in exchange for sexual favors. Resident #1 stated she felt sexually harassed by CNA #1. She stated that she was "OK" and said she had not experienced any negative effects related to the incident.

Record review of the Admission Record for

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M 500	Continued From page 8 Resident #1 revealed that she was admitted by the facility on 11/01/23, and had diagnoses that included Cardiogenic Shock, Presence of Automatic (Implantable) Cardiac Defibrillator, and Unspecified Systolic (Congestive) Heart Failure. Record review of the Admission Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 11/08/23 for Resident #1 revealed the resident had a Brief interview for Mental Status (BIMS) score of 15, which indicated Resident #1 was cognitively intact. Based on the facility's implementation of corrective actions completed by 12/20/23, the State Agency (SAA) determined the deficiency to be Past Non-compliance (PNC) and the deficiency was corrected as on 12/21/23, prior to the SA's entrance on 2/5/24. Validation: On 2/6/23, the SA validated through staff interviews, record review and facility policy review, the facility began an immediate investigation when the suspicion of sexual harassment involving CNA #1 was reported by CNA #2 on 11/26/23. Investigation included interviews of residents with a BIMS of 13 or higher that received care from CNA #1. The discovery of sexual misconduct of CNA #1, involving Resident #1, lead to the termination of CNA #1. The SA validated through record review of the "Quality Assurance Meeting Attendance and Agenda," dated 12/19/23 that the meeting was attended by the Medical Director and Infection Preventionist (who was also the ADON), the Administrator, DON, and the rest of the facility	M 500		

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Interdisciplinary Team (IDT) and that the Grievance/Report of Sexual Harassment by Resident #1 was reviewed at the meeting and a the committee members developed a plan to immediately address the incident to prevent it from reoccurring.

The SA validated through record review of Transmission Logs dated 12/19/23 and 12/21/23, printouts of E-Mails, and interviews with the Detective and the Administrator that the facility reported allegations and investigation results to all appropriate agencies and authorities.

The SA validated through record review that in-services began on 12/19/23, in which the Staff Development Coordinator (SDC) had provided training to all facility staff titled "Abuse/Neglect - Vulnerable Adult Exploitation Resident Rights".

The SA validated through record review that the Care Plan for Resident #1, dated 12/19/23 that the SSD updated the resident's Care Plan related to "The resident has potential for a psychosocial well-being problem related to alleging sexual harassment from an employee".

The SA validated through record review of the Nurse Practitioner (NP) Progress Note, that Resident #1was assessed and no physical or mental distress was noted.

The SA validated through record review of the Weekly Body Skin Check for Resident #1 that Resident #1 was assessed by facility nursing staff with no adverse findings.

The SA validated through record review of the 'NURSING FACILITY PSYCHIATRIC FOLLOW UP NOTE' for Resident #1 dated 12/19/23,

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M 500	Continued From page 10 revealed that Resident #1 was assessed by the Psychiatric Nurse Practitioner (PNP) with no untoward results related to her grievance of sexual harassment.	M 500		