

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 06/10/2024
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 255253	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 05/02/2024
NAME OF PROVIDER OR SUPPLIER VICKSBURG CONVALESCENT CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1708 CHERRY STREET VICKSBURG, MS 39180		
(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 at the facility from 4/30/24 through 5/02/24. During the survey, the SA determined that the facility was not in compliance with the requirements of participation in Medicare and Medicaid and cited F677.	F 000			
F 677 SS=D	The facility held a license for 100 beds, with a census of 78. ADL Care Provided for Dependent Residents CFR(s): 483.24(a)(2) §483.24(a)(2) A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene; This REQUIREMENT is not met as evidenced by: Based on observation, resident and staff interviews, record review and facility policy review the facility failed to remove facial hair on a female resident who required assistance with Activities of Daily Living (ADLs) for one (1) of 78 residents observed on initial tour. Resident #44. Findings Include: Record review of the facility policy titled, "Resident Hygiene" revised 06/2022 revealed "...Standard It is the practice of this facility to assist residents with bathing/showering to maintain proper hygiene and help prevent skin infections. Bathing includes washing the entire body, in addition, resident's fingernails and toenails will be trimmed when needed, facial hair shaved when needed and hair washed as	F 677	On 04/30/2024 at 7:59 PM, the Certified Nursing Assistant (CNA), validated by the Director of Nursing (DON), shaved resident #44's facial hairs to chin and upper lip. No other grooming needs were identified at this time. On 5/01/2024, CNA #1 was educated by the Staff Educator on the importance of providing appropriate resident grooming. All residents that have facial hair have the potential for being affected. On 04/30/2024, a focused resident grooming rounds was conducted by the DON, Assistant Director of Nursing (ADON), and the Staff Educator to ensure appropriate facial hair grooming. An ad hoc Quality Assurance Improvement Performance	5/24/24	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

05/16/2024

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 677	Continued From page 1 needed.... Staff Responsibilities...7. Staff providing assistance will provide nail care (unless medically contraindicated), shampoo, and shave each resident on every bath/shower day..." On 4/30/24 at 9:39 AM, an observation of Resident #44 lying in her bed revealed six (6) to eight (8) scattered facial hairs approximately three (3) inches long on her chin and some facial hair above her upper lip that was approximately one-half to one inch long. On 4/30/24 at 9:42 AM, an interview with Resident #44 revealed that no one had removed the hair from her face, and she would like the hair to be gone. She stated, "That would be wonderful if someone would." On 4/30/24 at 4:55 PM, an observation revealed scattered facial hair to Resident #44's chin and upper lip. On 4/30/24 at 5:00 PM, an interview with Licensed Practical Nurse (LPN) #1, confirmed that Resident #44 had long facial hair to her chin and hair above her top lip. She stated, " I can see it plainly." LPN #1 revealed the Certified Nursing Assistants (CNAs) were supposed to look at the residents while they gave them their baths and take care of facial hair if it was needed during that time. On 5/01/24 at 9:00 AM, an interview with CNA #1 revealed that Resident #44 was assigned to her yesterday, 4/30/2024, and she gave her a bath but did not shave her facial hair. She revealed that it was a hectic day, and she was focused on getting Resident #44 cleaned up and didn't look at or notice the facial hair. CNA #1 revealed that	F 677	(QAPI) meeting was held with Administrator, DON, Medical Director, Staff Educator, and Infection Control Preventionist on 05/02/2024 to discuss findings from the 4/30/2024 focused resident grooming rounds. Focused resident grooming rounds for facial grooming were implemented to monitor compliance. On 5/02/2024, the Administrator, DON, ADON, Staff Educator, and Minimum Data Set Coordinator (MDS) reviewed the Resident Hygiene Standard. The Resident Hygiene Standard required no revisions. Education on resident hygiene, including facial hair removal, was conducted by the Staff Educator for the CNAs, Registered Nurses, and Licensed Practical Nurses on 04/30/2024, 05/03/2024, 05/06/2024. Effective 05/03/2024, the Staff Educator began conducting tri-weekly focused resident grooming rounds to monitor the performance of facial grooming. These resident grooming rounds will continue for twenty-one (21) days, bi-weekly for thirty (30) days, weekly for thirty (30) days to monitor compliance with facial grooming ending on 07/22/2024. Any issues found will be addressed immediately. A Quality Assurance Improvement Performance (QAPI) meeting was held on 5/15/2024 with Administrator, DON, Medical Director, Staff Educator, and Infection Control Preventionist. The findings of the focused resident grooming rounds conducted and monitored by the Nurse Educator for facial grooming were presented. An additional		

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F 677	Continued From page 2 trimming facial hair was part of their job. She stated this was supposed to be done when they were doing resident baths and she failed to do this. CNA #1 confirmed she should have taken care of this. On 5/01/24 at 10:39 AM, an interview with LPN #2 revealed Resident #44 was confused and may not always know what was asked of her. She revealed that Resident #44 had worsening confusion and needed help with her bathing and personal hygiene. LPN #2 revealed that Resident #44 was not able to shave herself or pluck her own facial hairs. Record review of Resident #44's "Admission Record" revealed an admission date of 1/24/2024 and that she had diagnoses that included Osteoarthritis of Knee, Muscle Weakness, Unsteadiness on Feet and Unspecified Lack of Coordination. Record review of Resident #44's Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 5/02/2024 revealed under Section C, a Brief Interview for Mental Status (BIMS) Score of 11 which indicated that she had moderate cognitive deficits.	F 677	Quality Assurance Improvement Performance (QAPI) meeting will be held on 5/23/2024 with Administrator, DON, Medical Director, Staff Educator, and Infection Control Preventionist. The findings of the focused resident grooming rounds conducted by the Nurse Educator for the monitoring of facial grooming will be presented. The findings of these ongoing focused resident grooming rounds will be conducted, monitored, and presented by the Staff Educator and/or DON during the monthly Quality Assurance Improvement Performance (QAPI) meeting for the next three (3) months. Any trends or patterns identified by the QAPI committee will have appropriate actions as needed.		