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
	49WM	A. BUILDING: _____ B. WING _____	C 04/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WINONA MANOR HEALTH CARE AND REHABILITATIC	627 MIDDLETON ROAD WINONA, MS 38967

(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 a Complaint Investigation (CI) MS #23809 and CI MS #24538 at the facility on 04/08/24 through 04/09/24. During the survey, the SA determined the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements, related to CI #24538 for staffing and cited M225. The SA determined the facility was in compliance related to CI MS #23809 for verbal abuse. The facility held a license for 120 beds and they had a census of 95.	M 000		
M 225	45.4.1 Nursing Facility Nursing Facility. To be classified as a facility, the institution shall comply with the following staffing requirements: 1. Minimum requirements for nursing staff shall be based on the ratio of two and eight-tenths (2.80) hours of direct nursing care per resident per twenty-four (24) hours. Staffing requirements are based upon resident census. Based upon the physical layout of the nursing facility, the licensing agency may increase the nursing care per resident ratio. 2. Each facility shall have the following licensed personnel as a minimum: a. Seven (7) day coverage on the day shift by a registered nurse. b. A registered nurse designated as the Director of Nursing Services, who shall be employed on a full time (five [5] days per week) basis on the day shift and be responsible for all nursing services in	M 225		5/9/24

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M 225	Continued From page 1 the facility. c. Facilities of one-hundred eighty (180) beds or more shall have an assistant director of nursing services, who shall be a registered nurse. d. A registered nurse or licensed practical nurse shall serve as a charge nurse and be responsible for supervision of the total nursing activities in the facility during the 7:00 a.m. to 3:00 p.m. and 3:00 p.m. to 11:00 p.m. shift. The nurse assigned to the unit for the 11:00 p.m. to 7:00 a.m. shift may serve as both the charge nurse and medication/treatment nurse. A medication/treatment nurse for each nurses' station shall be required on all shifts. This shall be a registered nurse or licensed practical nurse. e. In facilities with sixty (60) beds or less, the director of nursing services may serve as charge nurse. f. In facilities with more than sixty (60) beds, the charge nurse may not be the director of nursing services or the medication/treatment nurse. 3. Non-Licensed Staff. The non-licensed staff shall be added to the total licensed staff, to complete the required staffing requirements. 4. There shall be at least two (2) employees in the facility at all times in the event of an emergency. This Statute is not met as evidenced by: Based on observation, staff and resident interviews, and record review, the facility failed to meet the minimum nursing staff ratio requirement of two and eight-tenths (2.80) hours per resident for eight (8) of ten (10) days reviewed.	M 225	1. The facility is currently offering a Certified Nursing Assistant (CNA) class which began on 4/15/2024 and includes 8 students. We have graduated 6 student in prior class which began on 3/25/2024 and	

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M 225	Continued From page 2 Findings Include: Record review of a statement signed by the Administrator (ADM) on facility letterhead documented: "(Proper Name of facility) does not have a policy on staffing." On 04/08/24 at 6:15 PM an interview with the Assistant Director of Nursing (ADON) revealed that they had several Certified Nursing Assistants (CNA) who signed up to work a lot of days and they called in at the last minute or just not show up. She revealed that when they had call-ins, they would go down the list, call, and text other staff to try and find coverage. She also revealed that it was often hard to find staff to come in at the last minute. On 04/09/24 at 9:00 AM, an observation and interview with Minimum Data Set (MDS) Nurse, revealed her working on the medication cart. She revealed that they didn't have enough nurses to work the floor so she was passing out medications today. She revealed that she was on call this past weekend and had to work a double shift last Friday, 04/05/24, had to work the 7 AM - 3 PM shift on Saturday, 04/06/24, and had to work a double shift on Sunday, 04/07/24. The MDS Nurse revealed that they were very short staffed. On 04/09/24 at 10:00 AM, an interview with CNA #1, revealed that she had worked here since June of 2023. She revealed that they were short-staffed and that she worked extra to help out when she could. CNA #1 revealed that they (the facility) were trying to hire people, that new staff came in often and didn't stay.	M 225	ended 4/5/2024. Our next class starts 5/6/2024. These students are paired with certified staff and assist on the floor with patient care. To meet staffing requirements on 4/9/2024, the Assistant Director of Clinical Services, department heads and other licensed staff were called in to meet the staffing need. The Human Resources Director, the Director of Clinical Services, and Assistant Director of Clinical Services made the calls. 2. All residents have potential to be affected. 3. In-services were held by Assistant Director of Clinical Services on 4/15/2024 with nursing and certified nursing assistants staff regarding meeting minimum staffing requirement and handling call-ins and no shows. Regional Vice President of Operations in-serviced Executive Director on 4/15/2024 to ensure staffing is adequate to provide adequate care and assistance for residents. Director of Clinical Services, Assistant Director of Clinical Services, and Human Resources were in-serviced on 4/15/2024 by Executive Director on ensuring staffing is adequate to provide care to the residents. 4. Beginning 4/15/2024, staffing will be monitored daily for compliance by Executive Director and Director of Clinical Services. In the event of staffing shortages, the Executive Director and Director of Clinical Services will be notified by staff. The staffing coordinator, Human Resource Director, Executive Director and	

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M 225	Continued From page 3 On 04/09/24 at 1:30 PM, ADM agreed that they had a low staffing problem and had things in place to fix it. Record review of "Staffing Grid" for 03/14/24 through 03/16/24 and for 04/04/24 through 04/08/24 revealed that the facility did not meet the minimum nursing staff ratio of 2.80 hours for six (6) out of 8 days reviewed. The Staffing Grid was verified by the ADON. On 04/09/24 at 1:45 PM, the ADM confirmed that the facility had not met the minimum state requirement of 2.80 hours for 6 out of 8 days reviewed and agreed that this put the residents at risk for not receiving the care to meet their needs. She confirmed that the nursing staff ratio requirement of 2.80 was not met on 03/14/24, 03/15/24, 03/16/24, 04/04/24, 04/06/24, and 04/07/24.	M 225	Director of Clinical Services will be responsible for calling staff to come in or arrange for staff to stay over to cover the next shift. An on call schedule has been implemented to cover call ins, no shows and adequate staffing for each shift. All finding will be reviewed on our Quality monitoring daily X 3 weeks, then weekly X 3 weeks, then monthly X 3 months to ensure minimum staffing requirements are met. Monitoring staffing will be ongoing and reports will be made monthly to the Quality Assurance Performance Improvement (QAPI) Committee beginning on 4/18/2024 times 6 months every 2nd Thursday in each month to ensure our solution has been substained.	