

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

PRINTED: 08/04/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 255127	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 07/13/2021
NAME OF PROVIDER OR SUPPLIER TISHOMINGO COMM LIVING CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1410 WEST QUITMAN STREET IUKA, MS 38852		
(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 on site complaint investigation on 07/12/21-07/13/21 for Complaint Investigation (CI) MS #17855, for facility limiting and denying residents visitation. The SA determined that the allegation was Substantiated for CI MS #17855 and cited deficiencies for F563 at a Scope and Severity Level (S/S) of a E. The SA also conducted an on site complaint investigation, CI MS #17877, for alleged neglect, quality of care, and quality of life. The SA did not substantiate CI MS #17877. The SA determined that the facility was not in compliance with the standards for participation in Medicare and Medicaid and cited deficiencies. The facility had a resident census of 70 and was licensed for 73 beds.	F 000			
F 563 SS=E	Right to Receive/Deny Visitors CFR(s): 483.10(f)(4)(ii)-(v) §483.10(f)(4) The resident has a right to receive visitors of his or her choosing at the time of his or her choosing, subject to the resident's right to deny visitation when applicable, and in a manner that does not impose on the rights of another resident. (ii) The facility must provide immediate access to a resident by immediate family and other relatives of the resident, subject to the resident's right to deny or withdraw consent at any time; (iii) The facility must provide immediate access to a resident by others who are visiting with the consent of the resident, subject to reasonable clinical and safety restrictions and the resident's right to deny or withdraw consent at any time; (iv) The facility must provide reasonable access to a resident by any entity or individual that provides health, social, legal, or other services to	F 563			7/30/21

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

TITLE

(X6) DATE

Electronically Signed

07/28/2021

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 563	Continued From page 1 the resident, subject to the resident's right to deny or withdraw consent at any time; and (v) The facility must have written policies and procedures regarding the visitation rights of residents, including those setting forth any clinically necessary or reasonable restriction or limitation or safety restriction or limitation, when such limitations may apply consistent with the requirements of this subpart, that the facility may need to place on such rights and the reasons for the clinical or safety restriction or limitation. This REQUIREMENT is not met as evidenced by: F563 S/S=E Based on record review, facility observation, resident interviews, and Responsible Party/Power of Attorney (POA) interviews, the facility failed to allow three (3) of five (5) residents reviewed to visit with family and friends in their private rooms. Residents #3; #4; and #5, were restricted by the facility to limited visitation and not allowed to visit in their private rooms per requests. Facility policy review entitled "Resident Rights" Revised and implemented on Nov. 28, 2016 stated, "The resident has the right to receive visitors of his or her choosing at the time of his or her choosing, subject to the resident's right to deny visitation when applicable, and in a manner that does not impose on the rights of another resident. The facility must provide immediate access to a resident by others who are visiting with the consent of the resident, subject to reasonable clinical and safety restrictions and the resident 's right to deny or withdraw consent at any time."	F 563	Resident #3 was assessed by Social Service Director (SSD) for any psychosocial needs related to visitation on 07/16/2021 and 07/23/2021 with no negative findings noted. Resident #3 and Responsible Party (RP) was educated on visitation policy and in room visitations as desired by SSD on 07/13/2021. Resident #4 was assessed by SSD for any psychosocial needs related to visitation on 07/16/2021 and 07/23/2021 with no negative findings noted. Resident #4 and RP was educated on visitation policy and in room visitations as desired by SSD on 07/13/2021. Resident #5 was assessed by SSD for any psychosocial needs related to visitation on 07/16/2021 and 07/23/2021 with no negative findings noted. Resident #5 and RP was educated on visitation policy and in room visitations as desired by SSD on 07/13/2021. Visitation policy was changed on 07/13/2021.		

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F 563	Continued From page 2 On 07/12/21 at 3:30PM an observation on entrance to the facility observed that the front door to the facility was locked and visitors were required to ring the door bell to be escorted in to the facility by staff and lead to the front desk to have temperatures taken by staff and to sign in to the facility and answer Covid 19 questionnaire. Interview on 07/12/2021 at 4:00 P.M. with the facility administrator (ADM) revealed that the current visitation policy was through pre-arranged appointments and that the visitors were encouraged to visit outside, in the front lobby, or in the community room that was set aside specific for visitation. The Administrator stated that the visitation policy and procedure had been revised and updated two weeks prior to 07/12/2021 to extend visitation and to allow "in-room" visitation but that the facility had not implemented this new policy yet. The ADM confirmed that all of the bedrooms for residents in the facility were private rooms. The ADM stated that currently the facility was providing visitation to the facility residents as outlined in the "Covid 19 Guidelines." The ADM stated that the goal of the facility was always to protect the residents. The ADM confirmed that the facility had no current cases of Covid 19 and that the last reported case at the facility was April 30, 2021. The ADM confirmed that the county has a current Covid infection rate of less than 10% and that "most all" of the facility residents have had at least one vaccine for Covid, but that it was her hopes to offer the vaccinations "in-house." The ADM confirmed that at the current time Walgreens Pharmacy was providing the vaccinations for Covid 19 per facility requests. Interview on 07/12/2021 at 4:45 P.M. with the Director of Nursing (DON) revealed that the	F 563	All residents in facility have the potential to be affected. All staff was educated on resident rights, visitation, and screening procedures, right to receive or deny visitors of his or her choosing by the Assistant Director of Nurses starting on 07/13/2021 and completed on 07/19/2021. All facility visitation appointments were terminated on 07/13/2021. Resident council was updated of visitation policy on 07/23/2021. A letter was sent to Responsible Parties of residents informing them of the visitation in room by Administrator on 07/19/21. The Quality Assurance and Performance Improvement(QAPI)committee met on 07/13/2021 and 07/23/2021. The Administrator will check with five Resident's, two times a week, for four weeks to ensure that visitations have been received as desired beginning on 07/26/2021. The Administrator will report findings to the QAPI committee monthly for two months until revision and/or resolution of the plan is determined complete by the QAPI committee.		

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F 563	Continued From page 3 visitation policy had been revised and updated two weeks prior to 07/12/2021 to dismiss the 14 day quarantine after residents went out of the facility. The DON confirmed that currently residents visitors must call ahead in advance and schedule a visit with the residents either outside, in the front lobby, or in the "Community Room." Residents that are on "palliative care" and/or bedfast, and/or openly refuse to leave their rooms, may have visitors in their rooms, but at this time that is the only in-room visits that they are allowing. The DON stated that the facility strongly encouraged the residents and visitors to visit per a schedule. The DON confirmed that all resident rooms were private rooms. An observation and interview on 07/13/2021 at 10:15 A.M. with Resident #5 revealed that she had been at the facility for approximately three (3) months and that she had not been allowed to have any visits from her family in her room. Resident #5 stated that she was limited to two (2) 45 minute pre scheduled visits per week and that her daughter would come on one day and the other day her daughter in law would come visit. Resident #5 stated that her family had never seen or visited her in her room. Resident #5 stated that her family would have to call the facility and make an appointment with the staff to pre-arrange visits. Resident #5 stated that she was allowed to visit in the facility lobby or outside. Resident #5 stated that she had not seen or visited with her grandchildren since she was admitted to the facility in the past three months. Resident #5 stated that she had been in another facility in another city and that her home was close to her current nursing home facility. Resident #5 had requested a transfer from the prior nursing home to come to (proper name of	F 563			

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F 563	Continued From page 4 facility) in order to be where her family lived, have a private room, and to be able to visit with her family more often. She also stated that she would love to visit with her family in her private room but that she is not allowed to and must go outside or to the front lobby. Resident #5 asked the State Agency Surveyor to please see what we could do to allow visitors in her private room. Resident #5 stated that she was tired of non-private visits in the lobby and not having access to her grandchildren. She stated that the facility would not allow her to go out of the facility for a short stay to visit family unless she quarantined for 10-14 days upon return. Record review for Resident #5 revealed that she was admitted to the facility on 05/11/2021 with diagnoses of Displaced Subtrochanteric Fracture of the Left Femur; Pressure Ulcer of Left Heel, Stage 3; Pressure Induced Deep Tissue Damage of Right Heel; and Type 2 Diabetes Mellitus with Hyperglycemia. The most recent Minimum Data Set (MDS) dated 5/11/2021 revealed a Brief Interview of Mental Status (BIMS) score of 10, which indicated mild cognitive impairment. Observation and Interview on 07/13/2021 at 10:35 A.M. with Resident #3, revealed that she was sitting alone in her private room in a chair. She stated that she had not had any visitors in her room. She stated that her daughter worked at the facility and she did visit with her. Resident #3 explained the visitation policy to the SA as no in-room visits are allowed and all visits had to be pre-arranged and were limited to two (2) visits per week either outside or in the front lobby. Record review for Resident #3 revealed that she was admitted to the facility on 02/26/2021 and	F 563			

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F 563	Continued From page 5 had diagnoses of Acute Cystitis with Hematuria; Wedge Compression Fracture of the Vertebra; and Lower back Pain. Resident #3 had a Minimum Data Set (MDS) dated 2/26/2020 that documented her Brief Interview of Mental Status (BIMS) score of 11, which indicated mild cognitive impairment. Observation and Interview on 07/13/2021 at 11:00 A.M. with Resident #4, revealed that she was alert and oriented and was sitting alone in her private room in a wheelchair. Resident stated that she had been a resident in the facility for almost two (2) years. Resident #4 stated that she would "love" to visit with her family in her private room, but was not allowed to due to the facility requiring that all visitation was to be pre-arranged by making an appointment with the facility to visit outside or in the lobby. Resident #4 became tearful when she expressed her desire to be re-united with her husband. Resident #4 stated that it would be most desirable to have visits in her private room with her husband. Resident #4 cried as she discussed visitation with the State Agency. Record review of resident #4 revealed that she was admitted to the facility on 05/24/2021, and originally on 01/06/2020. Resident #4 had diagnoses of Pneumonia, Chronic Obstructive Pulmonary Disease (COPD); Contusion of the Head; Major Depression; Heart Disease; Shortness of Breath; and Limited Activities due to Disability. Resident #4 had a Minimum Data Set (MDS) dated 05/24/2021 that documented a Brief Interview of Mental Status (BIMS) score of 15, which indicated that resident #4 was fully cognitively intact with no cognitive deficits.	F 563			

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F 563	Continued From page 6 Interview on 07/13/2021 at 12:20 P.M. with the Activities Coordinator (AC), revealed that she had been employed as the Activities Coordinator (AC) since March 2021. She stated that the current visitation policy for the residents in the facility was arranged via pre-scheduled appointments twice weekly. She stated that the facility policy was for visitation to take place in the lobby or outside. She stated that some of the residents that were not able to come to the lobby or outside were allowed limited visits in their rooms through pre-arranged appointments. The AC confirmed that all the residents had private rooms in the facility and had no room mates. She stated that she was not aware of any cases of Covid 19 in the facility since she began work in March 2021 and she confirmed that currently there were no visits allowed in the residents rooms. Interview on 07/13/2021 at 12:30 P.M. with the Power of Attorney (POA) daughter of resident #5, revealed that she wanted her mother to be allowed to receive visits in her private room at the facility. The POA stated that Resident #5 had been admitted to the facility on 05/11/2021 and that she (the POA) had not been allowed to see her mother's (resident #5's) room. The POA stated that she had requested to visit in her mother's room and was denied. The POA stated that since 05/11/2021 she had to call the facility staff and schedule a pre-arranged appointment to visit with her mother. The POA stated that she and her family were only allowed two (2) 45 minute visits each week. The visits must take place in the front lobby or outside of the building. The POA stated that resident #5 was transferred from another nursing home to be close to family. The POA stated that on 07/09/21 she had spoken with Social Services Designee/Admissions (SSD),	F 563			

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F 563	Continued From page 7 and had asked to see her mother's room. The SSD told the POA "no" you can not go to resident #5's room and you have already visited long enough today. The SSD told the POA that she would take a picture of resident #5's room and send it to her if she wanted to see what it looked like. The SSD told the POA that she was following the current visitation policy as outlined by the facility, and if she wanted to call the administrator and ask questions, she was welcome to call the ADM. The POA stated that she called the facility administrator, and left a message to please call her back and as of 07/13/2021 at 12:30 P.M. the POA had not heard from the facility administrator (ADM) and had not yet been allowed to visit in resident #5's room. The POA stated that she was considering moving her mother, yet again, in order to visit her in her room and to be able to go out on a pass without having to quarantine for 14 days. The POA stated that she had called several other facility's in the area and all of them were allowing in-room visits and were not limiting the time for visitors and were not quarantining residents for 14 days after they go out on pass. Interview on 07/13/2021 at 1:00 P.M. with the Social Services Designee/Admissions Coordinator (SSD) revealed that she had talked to resident #5's daughter (POA) about the visitation policy on 07/09/21 and had referred her to the facility administrator (ADM). The SSD stated that the current visitation policy was limited to two (2) 45 minute per week visits for each resident and they had to be pre-arranged by calling ahead for a scheduled appointment. The visitation areas were limited to the lobby, to outside, and in the community room. The SSD stated that on 07/09/2021 that resident #5 had already been in the lobby visiting with her	F 563			

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F 563	Continued From page 8 daughter (POA) and at the "end" of their visitation time the POA asked SSD to visit in the resident's room and the SSD told POA of resident #5 that she had used her visitation time for that day and that there was no in room visitation allowed; and if she had further questions about the visitation policy she was welcome to call the facility administrator. The SSD stated to the surveyor that she couldn't understand why resident #5's daughter (POA) "waited until the end of her visit to ask to go see resident #5's room?" The SSD stated that she had been employed at the facility for 4 ½ years and stated that the current visitation policy only allowed in-room visits for palative care and hospice care. Also, the SSD stated, "If a resident just refuses to leave their room we will allow in-room visits." The SSD stated that she was doing what she felt was "right" for the residents and she truly thought that limiting the residents in-room visitation was the "right thing to do." The SSD stated that it had been a difficult task for the facility staff to schedule all the visitation appointments for the residents.	F 563			