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
	46MH	A. BUILDING: _____ B. WING _____	C 06/27/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MYRTLES NURSING CENTER, LLC	1018 ALBERTA AVENUE COLUMBIA, MS 39429

(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 Complaint Investigations (CI) at the facility 6/26/24 through 6/27/24. 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. CI MS #25408 was investigated related to abuse. CI MS #25411 was investigated related to abuse. CI MS #25587 was investigated related to discharge rights and other and M500 was cited.	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 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	M 500		7/26/24

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M 500	Continued From page 1 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 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	M 500		

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M 500	Continued From page 2	M 500		

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 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

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M 500	Continued From page 3 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 the fullest exercise of these rights. This Statute is not met as evidenced by: Level II Based on staff and Resident Representative (RR) interviews, record review, and facility policy, the facility failed to protect private health information for one (1) of six (6) sampled residents. (Resident	M 500	By submitting the enclosed materials, we are not admitting to the truth or accuracy of any specific findings or allegations. We reserve the right to contest the findings or allegations as part of any proceeding and submit these responses pursuant to our	

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M 500	Continued From page 4 #6) Findings Include: A review of the facility's policy titled, "Confidentiality of Resident Information," with a revision date of 05/18 revealed, " Policy: The health record is the property of the health care facility and is maintained to serve the resident, the health care providers, and the institution in accordance with legal regulatory requirements. All resident care information shall be regarded as confidential and available only to authorized users ..." On 6/26/24 at 10:30 AM, during a telephone interview with the RR for Resident #3, she stated that on 6/18/24, she went to the facility to retrieve copies of her brother's medical records from the facility Administrator. The RR stated that she also received three (3) pages of the medical records of Resident #6. A record review of copies of the three (3) pages of medical records belonging to Resident #6 that were given to the RR of Resident #3, revealed that they were copies of a Dialysis "Transfer Summary," dated 6/18/24 for Resident #6. On 6/26/24 at 2:48 PM, during an interview with the Administrator, she confirmed that on 6/18/24, she provided the RR of Resident #3 with 1,300 pages of medical records belonging to Resident #3. The Administrator confirmed that she reviewed his medical records prior to giving them to the RR and that to her knowledge, she provided no other residents' medical records. The Administrator stated that the facility is supposed to protect the residents' health records. Since the RR received copies of medical records belonging	M 500	regulatory obligations. On June 27, 2024 a plan was put into place to remove the network copier to a more secure location behind a locked door. The copier was physically relocated on 7/2/2024. On 6/27/2024, the RR of Resident #6 was notified of the receipt of medical records by the RR of Resident # 3. All Residents receiving medical records requests have the potential to be affected by this deficient practice. On June 27, 2024 the facility Administrator initiated in services for all staff on The Health Insurance Portability and Accountability Act, Residents Rights, and Confidentiality of Medical Records On 6/28/2024, the facility Administrator began monitoring by reviewing each page of any medical records request received, no requests were received during that time. Auditing will continue once a week for 3 months, any deficient practice will be brought to the Quality Assurance Committee. A Quality Assurance and Improvement meeting is scheduled for 7/26/2024 to discuss findings from auditing medical records request and will continue for a total of three months.	

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M 500	Continued From page 5 to Resident #6, then she must have accidentally given the RR of Resident #3 medical records that did not belong to Resident #3. A record review of the "Face Sheet," for Resident #3 revealed the facility admitted the resident on 5/6/24. The resident had diagnoses that included Hemiplegia, of the Left Non-dominant Side and Chronic Obstructive Pulmonary Disease. A record review of the "Face Sheet," for Resident #6 revealed the facility admitted Resident #6 on 6/6/24. The resident had diagnoses that included End Stage Renal Disease and Type 2 Diabetes Mellitus.	M 500		