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
	48HM	A. BUILDING: _____ B. WING _____	C 10/24/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARE CENTER OF ABERDEEN	505 JACKSON ST ABERDEEN, MS 39730

(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 #25801 and CI MS #26372 at the facility on 10/23/24 through 10/24/24. 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 and cited M 975 for CI MS #26372 related to offensive odors. The SA also investigated resident rights and there was no deficient practice identified with CI MS#25801. The facility held a license for 105 beds at the time of the survey, and the facility census was 92.	M 000		
M 975	45.33.5 Toilet Room Cleanliness Toilet Room Cleanliness. Floors, walls, ceilings, and fixtures of all toilet rooms shall be kept clean and free of objectionable odors. These rooms shall be kept free of an accumulation of rubbish, cleaning supplies, toilet articles, etc. This Statute is not met as evidenced by: Level II Based on observation, staff, resident and resident family interviews, and record review the facility failed to create a clean environment as evidenced by strong, offensive odors and unclean bathroom floor for one (1) of seven (7) sampled residents reviewed. Resident #6 Findings include: Record review of "Statement" typed on facility letterhead dated 10/24/24 and signed by the Administrator (ADM) revealed that the "Facility does not have a policy to include odor free environment. However, the goal of the facility includes: To provide a safe, sanitary and odor	M 975	On October 23, 2024, the Housekeeping Supervisor immediately cleaned Resident #6□s bathroom to ensure the bathroom was free of liquid on the floor and odor. All Residents have the potential to be affected by this deficient practice. On October 23, 2024, Housekeeping Supervisor updated the cleaning schedule for Resident #6□s bathroom to be cleaned three-times per day. On October 23, 2024, all Residents□ bathrooms were inspected by Director of Nursing and Housekeeping Supervisor to ensure floor was free of liquid and no odors were present. On	11/25/24

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M 975	Continued From page 1 free environment for all patients, employees and visitors at the facility." An observation and interview on 10/23/24 at 8:40 AM, revealed a strong, pungent odor in Resident #6's room and a puddle of liquid on the floor in the bathroom at the base of and in front of the commode. The bathroom tile was dark, and the color of the liquid substance was difficult to determine. The wet area on the bathroom floor measured about one and one-half by two feet and had a foul odor. There was also a yellow liquid splattered on the commode seat. Resident #6 was sitting up in a chair in his room and he said that he didn't notice a foul odor and stated, "When you stay in here so long, you get used to it." An observation on 10/23/24 at 11:15 AM in Resident #6's room and bathroom revealed a foul odor and a liquid substance on the floor of the bathroom in front of the commode. An observation and interview on 10/23/24 at 12:10 PM in Resident #6's room with the ADM, confirmed the strong, foul odor in the room and bathroom and confirmed the liquid substance on the floor in the bathroom. ADM revealed that the liquid on the floor in the bathroom looked and smelled like urine and she would address that issue. She also agreed that they should provide a clean, odor free environment for the residents because this was their home. A phone interview on 10/23/24 at 12:35 PM with Complainant, Resident #3's daughter, revealed that she came to the facility often and visited her dad. She revealed that the room her dad was previously in, Room #416, had a pungent urine odor and stated, "It always smelled like pee." She	M 975	October 23, 2024, an Emergency Quality Assurance Meeting was held by the Administrator to develop an action plan to ensure Resident #6□s bathroom is free of liquid on the floor and no odors. Beginning on October 23, 2024, Housekeeping Supervisor or Charge Nurse will inspect daily to ensure compliance for four-weeks then weekly for one-month and quarterly until substantial compliance is achieved with M975. On November 04, 2024, the Administrator or Director of Nursing will report any concerns from the Plan of Correction to the Department Head Meeting weekly for four-weeks then monthly for three-months and quarterly until substantial compliance is achieved with M975. The Quality Assurance Committee will begin meeting on November 25, 2024, monthly for three-months and quarterly until substantial compliance is achieved with M975. If any concerns are identified with the current corrective action plan the Quality Assurance Committee will meet immediately and revise the corrective action plan as needed.	

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M 975	Continued From page 2 revealed that they had moved her dad into another room and there was no issue with the odor in his room now. She revealed that the facility still smelled of urine sometimes. The Complainant revealed that the urine odor was bad, and she felt sorry for the residents who could not speak for themselves and stated, "They deserve better." The Complainant revealed that she had talked to the staff about the odors and there hadn't been much change. Record review of Resident #6's "Admission Record" revealed an admission date of 05/24/21 and that he had diagnoses that included Chronic Obstructive Pulmonary Disease, Epilepsy, and Osteoarthritis. Record review of Resident #6's MDS with ARD of 09/11/24 under Section C revealed a BIMS Score of 10 which indicated that he had mild cognitive deficits. Section GG revealed that he required "supervision or touching assistance" with toileting hygiene.	M 975		