

MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 18CR	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/24/2024
NAME OF PROVIDER OR SUPPLIER BEDFORD CARE CENTER OF HATTIESBURG		STREET ADDRESS, CITY, STATE, ZIP CODE 10 MEDICAL BOULEVARD HATTIESBURG, MS 39401		
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M 000	Initial Comments The State Agency (SA) conducted an annual recertification survey at the facility from 10/21/2024 through 10/24/2024. 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 M780 and M1570.	M 000		
M 780	45.27.2 Activity Program Activity Program. Provisions shall be made for suitable recreational and entertainment activities for resident according to their needs and interests. These activities are an important adjunct to daily living and are to encourage restoration to self-care and resumption of normal activities. Variety in planning shall include some outdoor activities in suitable weather. This Statute is not met as evidenced by: Level II Based on observation, interviews, record review, and facility policy review, the facility failed to implement individualized and culturally relevant activities to meet the interests and preferences of one (1) of two (2) Spanish-speaking residents reviewed for activities. Resident #6. Findings Include: A review of the facility's policy, "Activities", dated 10/1/22, revealed, " Policy: It is the policy of this facility to provide an ongoing program to support residents in their choice of activities based on the comprehensive assessment, care plan, and preferences. Facility-sponsored group, individual, and independent activities will be designed to meet the interests of each resident...Policy	M 780	1. Immediately upon notification the Administrator procured the items which were care planned for the resident. Spanish crossword puzzle books, Spanish seek a word books, culturally appropriate adult coloring books as well as a tablet with all the above mentioned apps. In addition apps have been loaded to the tablet for translation and music. 2. All resident who have specific ethnic or cultural needs have the potential to be affected by this practice. 3. Staff Development Nurse will in-service, on 11/15/24, Activities staff on the requirement and importance	11/21/24

Mississippi State Department of Health

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

TITLE

(X6) DATE

Electronically Signed

11/07/24

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M 780	Continued From page 1 Interpretation and Implementation ...2. Activities will be designed with the intent to ...g. Reflect cultural and religious interests of the residents ...4. Activities may be conducted in different ways ...b. Person Appropriate - activities relevant to the specific needs, interests, culture, background, etc. for the resident they are developed for ..." During an observation on 10/21/24 at 11:01 AM, Resident #6 was observed lying in bed, awake, with the television on an English-language channel. Upon asking Resident #6 if she would prefer the television to be on a Spanish-speaking channel, she nodded affirmatively. During an interview on 10/21/24 at 1:16 PM, the Activities Assistant explained that the primary in-room activity she engaged in with Resident #6 involved brief visits to chat about family topics, including children and grandchildren. The Activities Assistant noted that the resident preferred staying in her room and did not participate in group activities. She added that Resident #6 enjoyed music, Spanish puzzles, coloring sheets, and watching television; however, she admitted that the television was set to English channels and that no attempts had been made to explore Spanish-language options. She acknowledged that no in-room activities were currently available that catered to Resident #6's cultural preferences. During an observation and interview on 10/22/24 at 11:25 AM, the Activities Director confirmed that the facility had no culturally specific activities for Resident #6, who is Spanish speaking. While in Resident #6's room, she confirmed the presence of a compact disc (CD) player but observed no CDs or materials for the resident to play. The Activities Director stated she knew it was	M 780	of providing individulized and culturally relevant activities in order to meet the interests and preferences of residents. 4. The administator will monitor all residents with specific ethnic or cultural needs, for a 3 month period beginning on 10/28/24, to ensure that culturally relevant activities are provided and appropriate materials and resources are available. The results of this monitoring will be presented at the monthly Quality Assessment & Assurance Committee Meeting for review, discussion and revision if needed beginning on 11/20/2024. These findings will be brought before this committee for 3 months.	

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M 780	Continued From page 2 important for the resident to have activities that she specifically enjoyed because this was her home, and it was a part of making her feel loved and considered. During an interview on 10/23/24 at 8:13 AM, the Administrator stated that she was unaware that the activities department was not providing culturally relevant activities. She emphasized the importance of providing quality and consistent care for all residents, acknowledging that Resident #6's cultural preferences should be respected as part of honoring her home environment. During an interview on 10/24/24 at 9:55 AM, Resident #6's granddaughter, acting as her Resident Representative (RR), shared that in her four years of visiting the facility, she had not observed any activities provided that aligned with her grandmother's cultural background. She expressed that her grandmother would benefit from having television programs or audio content in Spanish, as she believed this would enhance her enjoyment and connection to her heritage. A record review of the "Visual/Bedside Kardex Report" as of 10/22/24 revealed " ...Resident Care ...Activities ...Provided the resident with materials for individual activities as desired. The resident likes the following independent activities: Spanish word search puzzles ..." A record review of the "Admission Record" revealed the facility admitted Resident #6 on 03/04/21 with diagnoses including Parkinson's Disease. A record review of the Quarterly Minimum Data Set (MDS) with an Assessment Reference Date	M 780		

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M 780	Continued From page 3 (ARD) of 08/20/24 revealed Resident #6's preferred language was Spanish and she had a Brief Interview for Mental Status score of 4 which indicated her cognition was severely impaired.	M 780		
M1570	48.58.1 Infection Control The following infection control standards shall be met: 1. The facility must maintain and document an effective infection control program that protects patients, families, visitors, and facility personnel by preventing and controlling infections and communicable diseases. 2. The facility must have an active surveillance program that includes specific measures for prevention, early detection, control, education, and investigation of infections and communicable diseases in the facility. There must be a mechanism to evaluate the effectiveness of the program(s) and take corrective action when necessary. The program must include implementation of nationally recognized systems of infection control guidelines to avoid sources and transmission of infections and communicable diseases. 3. The facility must follow accepted standards of practice to prevent the transmission of infections and communicable diseases, including the use of standard precautions. This Statute is not met as evidenced by: Level II Based on observation, interview, and facility policy review, the facility failed to store reusable	M1570	1. Immediately upon notification the lift batteries were cleaned and sanitized by the facility Infection Preventionist.	11/21/24

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M1570	Continued From page 4 medical equipment in a manner to prevent the possible spread of infection as evidenced by mechanical lift batteries stored in the biohazard room on the rehabilitation hall for one (1) of two (2) biohazard storage rooms reviewed. Findings include: A review of the facility's policy, "Infection Prevention and Control Program", revised 6/15/23, revealed, " Policy: This facility has established and maintained an infection prevention and control program to provide a safe, sanitary, and comfortable environment and to help prevent the development and transmission of communicable diseases and infections as per accepted national standards and guidelines ...Policy Explanation and Compliance Guidelines ...10. Equipment Protocol ...a. All reusable items and equipment requiring special cleaning, disinfection, or sterilization shall be cleaned in accordance with current procedures ..." During an observation on 10/24/24 at 10:11 AM, of the biohazard room located on the Rehabilitation Hall, there was two (2) mechanical lift batteries on charging stations and two (2) batteries stored in the room. On 10/24/24 at 11:00 AM, in an interview and observation with Certified Nurse Aide (CNA) #1, the mechanical lift battery charging station and batteries were in the biohazard room on the Rehabilitation Hall. CNA #1 explained that the biohazard room was considered a "dirty area" and where she would place batteries that needed to be charged and would get the charged batteries as needed. There were no cleaning supplies available in area for sanitizing the batteries before using them on the mechanical lifts.	M1570	2. All residents have the potential to be affected by this practice. 3. The lift batteries and all charging devices were removed from the bio-hazard room on the Rehabilitation Hall on 10/28/24. The batteries and charging devices were relocated to the alcove outside the rehabilitation supply room. Sanitizing holder/wipes were also installed to sanitize batteries before use. Infection Control inservice will be provided by Staff Developemnt on 11/15/24. 4. The placement of these batteries and charging devices will be monitored weekly, by the Maintenance Director,for 3 months beginning on 10/28/24. These findings will be taken to the Quality Assessment & Assusance Committee Meeting for review, discussion and revision if needed beginning on 11/20/2024. These findings will be presented to this committee for 3 months.	

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M1570	Continued From page 5 On 10/24/24 at 11:08 AM, in an interview and observation with the Director of Nursing (DON), Registered Nurse (RN) #2, and RN #3 (Infection Control Team) they confirmed the mechanical lift charging stations and batteries were stored in the biohazard room on the Rehabilitation Hall and that any items retrieved from the contaminated room should be cleaned before re-using. The infection control team also confirmed there were no cleaning supplies in the area for the staff to clean the batteries before using. On 10/24/24 at 11:14 AM, in an interview with the Administrator, she stated she expected the facility staff to not store clean items in an area that is considered contaminated.	M1570		