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
	61MA	A. BUILDING: _____ B. WING _____	12/05/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JNH-MADISON INN	3550 HIGHWAY 468 WEST WHITFIELD, MS 39193

(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 an annual recertification survey and a complaint survey (CI), MS #27077 at the facility from 12/2/24 through 12/5/24. The SA investigated CI MS #27077 for an incident with the call lights. There were no citations related to the complaint investigations. 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 M1010.	M 000		
M1010	45.35.1 Housekeeping Facilities and Services Housekeeping Facilities and Services. 1. The physical plant shall be kept in good repair, neat, and attractive. The safety and comfort of the resident shall be the first consideration. 2. Janitor closets shall be provided with a mop-cleaning sink and be large enough in area to store house cleaning supplies and equipment. A separate janitor closet area and equipment should be provided for the food service area. This Statute is not met as evidenced by: Level II Based on observation, staff interview, and facility policy review, the facility failed to ensure a safe, sanitary, and comfortable environment by not preventing the buildup of dust and debris on kitchen and dining room vent covers for two (2) out of four (4) days of survey. Findings include: A review of the facility's policy titled "Cleaning of Patient/Resident Areas," dated 11/24, revealed, "	M1010	What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice? On December 03, 2024, following notification of the observation of buildings 28 and 34, the housekeepers dusted the dining room vents. The Coordinator Unit Officer contacted maintenance to assess/review the vents for replacement or repair. Beginning on December 04, 2024, maintenance started	1/17/25

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M1010	Continued From page 1 ... II. Policy This policy provides procedures to clean and disinfect all patient/resident areas to prevent the spread of infection ... Procedure B. Steps to cleaning and disinfecting a building: ... 2. The following should be free of stains, visible dust, streaks, gross soil, spider webs and handprints. Clean and disinfect as needed ... k. Vents ..." On 12/02/2024 at 10:45 AM, during an observation of Building 28, the vent cover in the pantry was noted to be unsanitary, with a significant buildup of solid dust and debris on the cover. On 12/02/2024 at 11:30 AM, during an interview with Dietary Staff #1 related to the cleaning schedule of the vents she stated, "Sometimes I do it myself, but it's done once a month." On 12/03/2024 at 1:45 PM, during a follow-up observation of Building 28, the vent in the pantry was again noted to have thick dust present on the vent cover. On 12/03/2024 at 2:00 PM, during an observation of Building 34's dining room, both vent covers were noted to be heavily soiled with approximately 3/8 inch of thick dust accumulation. On 12/03/2024 at 2:30 PM, during an interview with the Administrator, she stated that a work order for cleaning the vents had been in place for a week but had not been completed at the time of the interview. On 12/03/2024 at 2:45 PM, during an interview with Maintenance Staff #1, he stated that vent cleaning is usually performed by housekeeping	M1010	replacing/repairing dining room vents. 2. How the facility will identify other residents having the potential to be affected by the same deficient practice. The Madison Inn Nursing Home Administrator reviewed the resident census and identified that all residents had the potential to be affected by the deficient practice. Of the 56 residents, no resident was affected by the deficient practice. 3.What measures will be put into place or systemic changes made to ensure that the deficient practice will not recur. On December 04, 2024, the Environment Service Director in-serviced new hires, full-time, and contract housekeepers on Policy 191-29 Cleaning of Patient/Resident Areas. Housekeepers will dust vents daily for 30 days, then weekly ongoing. Housekeepers will report any paint chip, rust, or broken vents to the Coordinator Unit Office (CUO). The CUO will complete the electronic work order for maintenance to repair/replace vents. Beginning on December 04, 2024 maintenance repaired/replaced the dining room vents on buildings 28 and 34 and will sustain dining room vents ongoing as required. 4. How the facility plans to monitor its performance to make sure that solutions are sustained. The facility must develop a	

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M1010	Continued From page 2 and was unsure of how often this is done. On 12/03/2024 at 2:55 PM, during a phone interview with the Housekeeping Supervisor, she stated that vents should be cleaned weekly. She explained that housekeeping can clean vents with a washcloth or soap but that Maintenance staff is responsible for removing and performing thorough weekly dusting of the vents. On 12/03/2024 at 3:05 PM, during an interview with Dietary Staff #2, she stated that maintenance is usually responsible for cleaning the vents but admitted, "No one has been here in a while." She confirmed the vents were thickly covered in dust, adding, "I see why you are concerned because the vents have a lot of dust covering them."	M1010	plan for ensuring that correction is achieved and sustained. This plan must be implemented, and the corrective action evaluated for its effectiveness. The plan of correction is integrated into the quality assurance system. Beginning December 05, 2024, the Coordinator Unit Officer (CUO) will monitor housekeepers using the Environmental Services Housekeeper Round sheet daily for 30 days, then weekly ongoing. Beginning December 12, 2024, the CUO will report findings weekly to the Environment Service Director and Madison Inn Nursing Home Administrator (NHA), then monthly. On January 06, 2025, Madison Inn□s NHA will report audit findings to the Quality Assurance and Performance Improvement (QAPI) committee, then quarterly for action until consistent, substantial compliance has been achieved as determined by the committee. Should systemic changes not be practical, the QAPI committee will investigate and determine if further action(s) must be implemented. The actions from Madison Inn□s QAPI meeting will be reported to the Jaquith Nursing Home Executive Committee.	