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
	70RH	A. BUILDING: _____ B. WING _____	C 11/19/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
REST HAVEN HEALTH AND REHABILITATION	103 CUNNINGHAM DRIVE RIPLEY, MS 38663

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M 000	Initial Comments The State Agency (SA) conducted a complaint investigation (CI) MS #26477 and CI MS #27039 at the facility from 11/18/24 through 11/19/24. During the survey, the SA determined that the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements and cited M 500 for resident rights. The census at the time of the survey was 46 with a license for 60 beds.	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	M 500		12/6/24

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M 500	Continued From page 1 nurse practitioner/physician assistant in his 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	M 500		

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M 500	Continued From page 2	M 500		

transactions made on his behalf should the 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,

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M 500	Continued From page 3 and send and receive his personal mail 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	M 500	1. On 11/18/2024, grievances were reported by Resident #3, Resident #4, Resident #5, Resident #6, Resident #7, Resident #9, Resident #10. The reported grievances stated that Certified Nursing	

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M 500	Continued From page 4 Based on staff and resident interview, record review, and facility policy review, the facility failed to ensure each resident was treated with dignity and respect for seven (7) of 16 residents sampled. Residents #3, #4, #5, #6, #7, #9, and #10. Findings include: Record review of facility policy titled, "Resident Rights and Dignity Management - Dignity" dated 5/22, revealed, "It is the practice of this facility to protect and promote resident rights and treat each resident with respect and dignity as well as care for each resident in a manner and in an environment that maintains or enhances resident's quality of life by recognizing each resident's individuality. 1. All staff members are involved in providing care to residents to promote and maintain resident dignity and respect resident rights at all times. ... 5. When interacting with a resident, pay attention to the resident as an individual. ... 9. Speak respectfully to residents ... 10. Respect the resident's living space and personal possessions. ... 14. 'Treated with dignity' means the resident will be assisted in maintaining and enhancing his or her self-esteem and self-worth. 15. Staff shall speak respectfully to the residents at all times, including addressing the resident by his or her name of choice and not labeling or referring to the resident by his room number, diagnosis or care needs. ... 20. Demeaning practices and standards of care that compromise dignity are prohibited. Staff shall promote dignity and assist residents as needed. 21. Staff shall treat cognitively impaired residents with dignity and sensitivity." Record review of facility policy titled, "Resident	M 500	Assistant (CNA) #1 talked and treated them inappropriately. As a result of these allegations reported on 11/18/2024, Certified Nursing Assistant (CNA)#1 was placed on suspension pending investigation. Certified Nursing Assistant (CNA) #1 was terminated on 11/21/2024, as a result of the investigation findings. Resident #3, Resident #4, Resident #5, Resident #6, resident #7, Resident #9, and Resident #10 grievances were investigated and resolved. The Director of Nursing and facility Administrator interviewed each resident again on 11/20/2024 with no new concerns or grievances to report. 2. All residents have the potential of being affected by this practice of resident rights not being honored and or exercise of Resident Rights. On 11/20/2024, the Administrator and Director of Nursing (DON) identified and interviewed a total 25 of 47 residents who had the ability of being interview regarding the reporting of Certified Nursing Assistant (CNA#1) allegedly speaking inappropriately to residents. 3. The Administrator and Director of Nursing interviewed 25 residents to note any additional violation of Resident Rights on 11/20/2024. No other grievances were reported at the time. On 11/20/2024 additional education on the Resident Rights Standard was provided to 7 of 7 dietary staff, 6 of 6 housekeeping staff, 2 of 2 maintenance staff, and 36 of 37 nursing department staff by the Nurse Educator. the one nursing staff will be inservice before next schedule shift. On 11/20/2024 the QAPI committee reviewed	

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M 500	Continued From page 5 Rights and Dignity Management - Resident Rights" dated 5/2022, revealed, "Employees shall treat all residents with kindness, respect and dignity". Record review revealed that the State Agency (SA) received an anonymous complaint that stated that Certified Nursing Assistant (CNA) #1 was verbally and mentally abusing residents and the staff had reported it many times to the Administrator but nothing had been done. Resident #3 An interview with Resident #3 on 11/18/24 at 10:30 AM, revealed CNA #1 had a "bad attitude problem". She stated several weeks ago, CNA #1 came into her room and had pushed the lift towards her and she had to stop it with her foot to keep it from hitting her. She stated she told the CNA to be careful, but she acted like she did not even care. She stated the facility was her home and she had the right to feel cared for and to not have to deal with a "grumpy worker with a mean attitude". She stated she had talked to the Social Worker and the Administrator about this. Record review of the "Admission Record" revealed the facility admitted Resident #3 on 7/20/17. Record review of Resident #3's Minimum Data Set (MDS) with Assessment Reference Date (ARD) of 10/22/24 revealed a Brief Interview for Mental Status (BIMS) score of 15 which indicated the resident was cognitively intact. Resident #4 An interview on 11/18/24 at 10:45 AM, with	M 500	the Resident Right Standard and no recommended changes were made to the standard. All new hire employees will receive training on Resident Right Standard and Customer Service upon hire, annually and as need basis. Multiple training session were provided by Corporate Compliance Officer on 12/3/2024 and 12/4/2024 on Resident Rights Standard focusing on Dignity and respect and Customer Service Creating a Culture of Hospitality. All resident right concerns identified will be placed on the grievance concern log and will be maintained by Social Services Director. Logs will be reviewed at least monthly by the Quality Assurance Performance Committee. 4. The facility charge nurse as assigned will make weekly staff observation round on 2 staff member on all shifts for 30 days beginning 11/20/2024 and then monthly for three months to ensure customer service is being perform by all staff. The Director of Nursing or the Social Service Director will conduct four resident interviews weekly for 30 days beginning 11/20/2024 and then monthly for three months to ensure compliance with the Resident Right Standard. Any concerns noted will be logged immediately and reported to the Facility Administrator for evaluation and correction in compliance with reporting requirements. The findings of the interviews will be reported to Quality Assurance Committee beginning 12/5/2024 and then monthly times 3 months. The interviews will be reviewed by the Interdisciplinary Team and Quality Assurance Committee which	

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M 500	Continued From page 6 Resident #4 revealed, "We have one CNA here that is a wild one" and her name is (proper name for CNA #1). She stated when she has asked her to do things for her that she would often ignore her or make rude comments like "What do you want now." She stated she did not feel that it was at the level of abuse and was not afraid of here, but she felt that her rights as a resident to be treated with dignity and respect were not honored by this CNA. She stated she had talked with the Social Worker in the past about these concerns with CNA#1. Record review of the "Admission Record" revealed the facility admitted Resident #4 on 7/26/23. Record review of Resident #4's MDS with ARD of 11/5/24 revealed a BIMS score of 15 which indicated the resident was cognitively intact. Resident #5 During an interview on 11/18/24 at 10:48 AM, Resident #5 stated CNA #1 had a "bad attitude" and had been rude and disrespectful to her. She stated, "It might just be her way, but I don't like to be talked to like that." She also stated that "Respect was not in (proper name removed) CNA #1's repertoire." She stated, "I tell the staff that I might be old but there is not a damn thing wrong with my mind". She stated that she did not feel that this was verbal abuse but being treated disrespectfully in her own home did go against her rights as a resident of the facility. Record review of "Admission Record" revealed the facility admitted Resident #5 on 3/25/16. Record review of Resident #5's MDS with ARD of	M 500	consists of the Administrator, Director of Nursing, RN Supervisors, Dietary Manager, Nurse Educator, Medical Records Nurse, Social Service Director, Activity Director, and Medical Director to ensure compliance with reporting alleged reportable incidents. The Quality Assurance Committee will make necessary recommendations as needed.	

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M 500	Continued From page 7 10/28/24 revealed a BIMS score of 15 which indicated the resident was cognitively intact. Resident #6 During an interview on 11/18/24 at 11:15 AM, Resident #6 revealed some staff are just "awful" and will not listen to him. He stated, "They just do what they want to do". He stated he told them to "Give me their ear and listen to what I'm trying to tell them instead of doing what you want to do for me". He stated he had told CNA #1 and others that "I'm going to the boss and tell him, and they tell him to go ahead and tell him and they will tell on me too". He also stated that CNA #1 told him he needed to go somewhere else since he could do some of his own care, and he told her this was his home, and he had the right to be there. He stated he had mentioned these concerns to the Social Worker and to the Administrator. He stated he did not feel abused, but he did feel very disrespected by CNA #1. Record review of "Admission Record" revealed Resident #6 was admitted to the facility on 12/6/19. Record review of Resident #6's MDS with ARD of 10/21/24 revealed a BIMS score of 13 which indicated the resident was cognitively intact. Resident #7 During an interview on 11/18/24 at 11:30 AM, Resident #7 revealed that CNA #1 "Smarts off to me all the time." He stated he did not remember what was said each time, but did know she was very rude and mean, not abusive, but definitely not nice. He stated she also put his meal tray down roughly and it fell on him. He stated that	M 500		

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she also complained a lot about having to reposition him and adjust his bed with the manual crank.

Record review of "Admission Record" revealed the facility admitted Resident #7 on 4/17/24.

Record review of Resident #7's MDS with ARD of 10/4/24 revealed a BIMS score of 8 which indicated the resident had moderate cognitive impairment.

Resident #9

During an interview on 11/19/24 at 2:00 PM, Resident #9 revealed some of the staff had been disrespectful to her. She stated she had pressed the call light for assistance and a staff member came in and asked what she needed now in a rude and mean way and then made comments about how the room smelled awful. She stated she could not help that she could not control her bowels or bladder and for the staff to say that was very disrespectful to her and it was not treating her with dignity. She stated she had the right to be treated with dignity and respect and making comments like that was not acceptable.

Record review of "Admission Record" revealed the facility admitted Resident #9 on 2/12/18.

Record review of Resident #9's MDS with ARD of 9/13/24 revealed a BIMS score of 15 which indicated the resident was cognitively intact.

Resident #10

An interview on 11/19/24 at 2:10 PM, with Resident #10 revealed some of the staff had "bad attitudes" and treated him and other residents

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disrespectfully. He stated one nurse was rude and he felt that she always questioned what he said he needed. He stated he received the care needed but at times it was with attitude and "those with bad attitudes either need to be respectful or go home."

Record review of "Admission Record" revealed the facility admitted Resident #10 on 7/25/24.

Record review of Resident #10's MDS with ARD of 9/27/24 revealed a BIMS score of 12 which indicated the resident had moderate cognitive impairment.

Record review of the "Grievance Log" for the past six (6) months did not reveal any of the concerns voiced by these residents.

Interview on 11/18/24 at 11:45 AM, with CNA # 2 stated CNA #1 was loud and her voice carried.

Interview on 11/18/24 at 11:55 AM, with the Registered Nurse (RN) supervisor, stated she works both rotations, so she is aware of most of the staff and CNA #1 is thorough and gets the job done but she is loud and sounds blunt when talking and does not have a friendly tone.

Interview on 11/18/24 at 1:40 PM, with CNA #3, stated at one time, CNA #1 was "kinda shaky" with the way she would talk, not abusive, but rude. She stated she is loud and rough and sounds mean and disrespectful but she had been trying to talk softer and kinder and she "has made a complete turnaround". CNA #3 stated that CNA #1 would do good care for her residents but not with a friendly attitude.

Interview on 11/18/24 at 1:48 PM, with Licensed

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M 500	Continued From page 10 Practical Nurse (LPN) #1 stated she works with CNA #1 almost every shift since they are on the same rotation and she had never heard her say anything that was mean or disrespectful to a resident, but that she does have a "higher volume of speech." Interview on 11/19/24 at 10:50 AM, with CNA #1 confirmed that she has a loud voice, and it carries and she knows she sometimes sounds grumpy, but that is the way her voice is. She stated that she takes care of her residents and tries to do what she can for them to meet their needs. She acknowledged that she may appear rough and loud, but she tries to do her job in a good way and that she just thinks her voice is loud. During an interview on 11/19/24 at 3:00 PM, the Director of Nursing (DON) confirmed that each resident has the right to be treated with dignity and respect and the facility failed to ensure that each resident's rights were honored. During an interview on 11/19/24 at 4:00 PM, the Administrator stated each resident deserves to be treated with dignity and respect and he confirmed that there were several residents that were not treated with dignity and respect and the facility failed to honor each of these resident's rights. He stated that the facility had recently investigated an allegation of abuse with CNA #1 but was not able to substantiate the allegation and it had been reported to the State Agency. He stated that the CNA was suspended while the investigation was going on but it was not related to these concerns. He confirmed that there was a witness to this recent allegation and that it just didn't occur after the statements were gathered.	M 500		