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
	59AL	A. BUILDING: _____ B. WING _____	C 03/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LONGWOOD COMM LIVING CENTER	200 LONG STREET BOONEVILLE, MS 38829

(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 #27737 at the facility on 3/19/25. During the survey, the SA determined that the facility was not in compliance with the requirements with the Mississippi Regulations for Minimum Standards for Institutions for the Aged or Infirm and cited M 500 for Resident Rights. The census at the time of the survey was 49 with a license for 61 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 nurse practitioner/physician assistant in his	M 500		4/22/25

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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 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	M 500		

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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 observation of a social media post, staff and resident interviews, record review, and facility policy review, the facility failed to provide care for a resident in a manner that maintained the resident's dignity. A picture of Resident #1	M 500	1. On 3/19/2025, the photograph of Resident number one was immediately removed from Longwood's Facebook social media page. 2. This alleged deficient practice has the potential to affect all residents that have	

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M 500	Continued From page 4 was posted to the facility's social media account which portrayed the resident in an undignified manner for one (1) of four (4) residents sampled. Resident #1 Findings include: Record review of facility policy titled, "Resident Rights" dated 7/24/23, revealed, "Employees shall treat all residents with kindness, respect, and dignity. ... 1. Federal and state laws guarantee certain basic rights to all residents of this facility. These rights include the resident's right to: a. a dignified existence; b. be treated with respect, kindness, and dignity". Record review of facility policy titled, "Dignity" dated 7/24/23, revealed, "Each resident shall be cared for in a manner that promotes and enhances his or her sense of well-being, level of satisfaction with life, and feelings of self-worth and self-esteem. ... Residents are treated with dignity and respect at all times". Observation and review of the social media page for the nursing facility with the date posted as 1/10/25, revealed Resident #1 sitting in her wheelchair holding a cup of ice cream. She was dressed in a blue, long-sleeved shirt and peach colored pants. The resident was wet between her mid thighs and on her right leg. The resident's lower abdominal and groin area appeared to be wet with clear fluid and the wetness extended to her knees and appeared dark in color. During an interview with the resident on 3/19/25 at 12:30 PM, Resident #1 stated she did not use the toilet often, had accidents, and wore briefs that were changed by the staff frequently.	M 500	signed consents to have their pictures posted on social media. 3. On. 3/19/2025, an all-staff in-service began on residents' rights including that a facility must treat each resident with respect and dignity and care for each resident in a manner that promotes, maintains or enhances his or her quality of life. This was completed on 3/25/2025. 4. Beginning 3/19/2025, all social media posts will only include above the waist photos. Prior to each post, the Activity Director will submit pictures to be reviewed by by the Director of Social Services, or the Director of Nursing, or the Administrator. The Administrator will monitor the Facebook page three times weekly times four weeks, then once a week for two months. Findings will be reported to the Quality Assurance and Performance Improvement Committee (QAPI) monthly times three months beginning with our next Quality Assurance and Performance Improvement Committee Meeting scheduled for April 22, 2025.	

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M 500	Continued From page 5 During an interview on 3/19/25 at 12:45 PM, the Administrator stated the Activity Director had taken the pictures during activities and other events and had posted these on the facility's social media page. She stated it was the facility's responsibility to ensure each resident's rights, including being treated with dignity and respect, were honored. During our interview, she reviewed the social media post dated 1/10/25 of Resident #1 and confirmed that the picture of Resident #1 was a resident rights concern and should have been monitored more closely prior to being posted. During the interview with the Administrator, the Director of Nursing (DON) came into the Administrator's office at 12:48 PM on 3/19/25 and confirmed that the picture on social media of the resident violated the resident's rights. She confirmed the facility failed to ensure that the rights of Resident #1 were not violated before the picture was posted to social media. Review of Resident #1's "Admission Record" revealed the facility admitted Resident #1 on 3/24/23 with diagnoses that included Chronic Obstructive Pulmonary Disease (COPD) and Alzheimer's Disease. Record review of Resident #1's Minimum Data Set (MDS) dated 2/26/25 revealed a Brief Interview for Mental Status (BIMS) of 8 which indicated the resident had moderate cognitive impairment.	M 500		