

MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 41TM	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 01/17/2025
NAME OF PROVIDER OR SUPPLIER DIVERSICARE OF TUPELO		STREET ADDRESS, CITY, STATE, ZIP CODE 2273 SOUTH EASON BOULEVARD TUPELO, MS 38804		
(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 #26911 and CI MS #27157 at the facility from 1/15/25 through 1/17/25. During the survey the SA determined that the facility was not in compliance with the Mississippi Regulations for Minimum Standards for Institutions for the Aged or Infirm. The SA determined the facility was not in compliance for CI MS #27157 regarding residents rights and cited M 500. The facility was found to be in compliance for CI MS#26911 regarding quality of life and assessing a resident with no deficiencies cited. The census at the time of the survey was 97 with a bed capacity of 120 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;	M 500		2/7/25

Mississippi State Department of Health

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

TITLE

(X6) DATE

Electronically Signed

02/05/25

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M 500	Continued From page 1 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 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	M 500			

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M 500	Continued From page 2 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 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;	M 500		

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M 500	Continued From page 3 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 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	M 500		

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M 500	Continued From page 4 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 Pattern Based on staff and resident interviews, record review, and facility policy review, the facility failed to honor residents' right to vote in the 2024 election for three (3) of six (6) residents sampled for resident's rights. Residents #4, #5, and #6 Findings Include: Record review of facility policy titled, "Resident's Rights and Quality of Life", dated 5/1/12, revealed, "It is the policy of (proper name removed) that all residents have the right to a dignified existence, self-determination, and communication with an access to people and services inside and outside the facility. A resident has the right to exercise his/her rights as a resident of the facility and a citizen or resident of the U.S. and be free of interference, coercion, discrimination, or reprisal by (proper name removed) or its employees for the exercise of such rights". During an interview on 1/16/25 at 11:10 AM, Resident #6 revealed she had told the staff several weeks before the 2024 presidential election that she wanted to vote with a mail-in ballot, but she was unable to. She stated, "I wanted to vote, but I can't walk, and they didn't bring the ballot to me". An interview with Resident #7 on 1/16/25 at 11:15 AM revealed she had informed the facility staff that	M 500	On 01/17/2025, the Administrator met with Resident #6, Resident #7, and Resident #8 regarding voting preferences. Medical Affidavit completed for Medical Director signature and approval. All residents have the potential to be affected by this practice. On 01/16/2025, the Administrator educated the Social Services Director on the center policy for Resident's Rights/Exercise of Rights [Voting]. On 01/22/2025, the Administrator educated the Admissions Director regarding Resident Rights/Exercise of Rights [Voting] to assure the process of inquiring regarding voting preferences are addressed during the admission process. On 01/29/2025, the Assistant Director of Nursing, Director of Care Coordination and Admissions Coordinator began conducting resident interviews to assure voting preferences current and complete. This interview includes the desire to vote by absentee ballot versus in person. On 01/27/2025, the Administrator began an audit of new admissions to assure voting preferences are current, appropriate documentation for voting precinct and	

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M 500	Continued From page 5 she wanted to vote in the 2024 presidential election and the staff told her they would get her a ballot, but she did not receive one. She stated, "I wanted to vote, but I couldn't get there". During an interview on 1/16/25 at 11:45 AM, Resident #8 revealed he was registered and wanted to vote in the presidential election, but he was not taken to the poll. He stated that he was the son of a World War 2 veteran and his right to vote was taken away from him. He also stated, "I'm an American and I have the right to vote". He stated he was very upset that he missed this opportunity because no one would take him. When asked if the staff asked him about identification, he said the facility had copies of his information and if there were other requirements, the staff should have assisted him. During an interview on 1/16/25 at 11:50 AM, Social Services #1 confirmed that not all of the residents that had expressed the desire to vote were given the opportunity on election day. She stated she worked with the residents that wanted to vote and completed their registration forms. She revealed she thought that with the registration forms, the residents would automatically receive their absentee ballots by mail. Towards the end of October, the residents that had previously requested the disabled status for absentee ballots received their ballots, but the ones she had registered had not received theirs. She called the Circuit Court and was told that if a resident was disabled, the resident must call and request the ballot to be mailed. She stated that there was only about a week left until the election and we didn't have time to help everybody call the Circuit Court. She acknowledged it was her responsibility	M 500	absentee ballot are current and unchanged. Administrator audit of new admissions to continue for eight weeks. Audit findings were brought to the Quality Assurance Performance Improvement on 01/31/2025 for review and recommendation and will be brought monthly for three months to assure continued compliance.		

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M 500	Continued From page 6 to ensure that each resident's right to vote was honored and because she failed to research the proper steps in this process, many residents were unable to vote. She confirmed the facility failed to ensure that each resident that desired to vote was given the opportunity. An interview with the Administrator on 1/16/25 at 11:55 AM confirmed that each resident had the right to vote, and the facility failed to ensure they were assisted properly. Record review of the list of residents that were currently registered and newly registered for voting revealed 47 residents who desired to vote. Record review of the list titled, "Voting 11/5/24" revealed nine (9) residents voted with absentee ballots, four (4) residents voted at the poll, one (1) listed as not having identification (Resident #8), one listed as being at dialysis, and six (6) declined to go to the poll. Record review of Resident #6's "Admission Record" revealed the facility admitted the resident to the facility on 10/4/22. Diagnoses included Heart Failure, Hypertension, and Hypertensive Heart and Chronic Kidney Disease. Record review of Resident #6's Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 12/16/24, revealed a Brief Interview for Mental Status (BIMS) score of 15 which indicated the resident was cognitively intact. Record review of Resident #7's "Admission Record" revealed the facility admitted the resident on 11/24/23. Diagnoses included Type 2 Diabetes	M 500			

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M 500	Continued From page 7 Mellitus, Abnormalities of Gait and Mobility, and Peripheral Vascular Disease. Record review of Resident #7's MDS with an ARD of 12/1/24, revealed a BIMS score of 15 which indicated the resident was cognitively intact. Record review of Resident #8's "Admission Record" revealed the facility admitted the resident on 5/2/23 originally with the most recent admission of 4/2/24. Diagnoses included Alzheimer's Disease, Hypertensive Heart Disease, and Hypertension. Record review of Resident #8's MDS with an ARD of 1/8/25, revealed a BIMS score of 9 which indicated the resident had a moderate cognitive impairment.	M 500			