Mississippi State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED **09/04/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PLAZA COMMUNITY LIVING CENTER	**4403 HOSPITAL ROAD , PASCAGOULA, Mississippi, 39581**

(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) COMPLETION DATE
M0000	Initial Comments The State Agency (SA) conducted Complaint Investigations (CIs), MS #2581231, MS #2601558, MS #2595156, and MS #2600621, at the facility from 9/2/25 through 9/4/25. MS #2581231 was investigated for an allegation of neglect when a resident developed a swollen and infected leg that was later diagnosed as a hematoma requiring hospitalization, blood transfusions, and surgery. MS #2601558 was investigated for an allegation of facility failure to maintain a secure environment when entrance doors were not locking properly, creating a risk for residents with dementia to elope. MS #2595156 was investigated for an allegation of neglect and insufficient staffing when a fire in the ceiling disabled auto-lock doors, leaving staff to monitor multiple unsecured exits while also being responsible for resident care. MS #2600621 was investigated for an allegation of staff misconduct, including mishandling of narcotics, use of inappropriate language toward residents, leaving the facility during scheduled shifts, and failure to adequately staff and manage resident needs. During the survey, the SA determined the facility was in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirement. There were no deficiencies cited.	M0000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE