

MSDH - Health Facilities Licensure and Certification

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>04KO</b>                       | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____                                                   | (X3) DATE SURVEY<br>COMPLETED<br><br><b>10/16/2025</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>MS STATE VETERANS HOME-KOSCIUS</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>310 AUTUMN RIDGE DRIVE<br/>KOSCIUSKO, MS 39090</b> |                                                                                                                          |                                                        |
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| M 000                                                                     | Initial Comments<br><br>The State Agency (SA) conducted an annual re-licensure survey on 10/14/25 through 10/16/25 at the facility. During the survey, the SA found the facility not to be in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements and cited M 610.<br><br>The census at the time of survey was 114 with a license for 150 beds.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | M 000                                                                                          |                                                                                                                          |                                                        |
| M 610                                                                     | 45.21.2 Activities of daily living<br><br>Activities of daily living. Each resident shall receive assistance as needed with activities of daily living to maintain the highest practicable well being. These shall include, but not be limited to:<br><br>1. Bath, dressing and grooming;<br><br>2. Transfer and ambulate;<br><br>3. Good nutrition, personal and oral hygiene; and<br><br>4. Toileting.<br><br>This Statute is not met as evidenced by:<br>Level II<br>Based on observation, resident and staff interviews, record review and facility policy review, the facility failed to ensure residents received assistance with Activities of Daily Living (ADL) to maintain their highest practicable well-being for three (3) of 24 sampled residents. Residents #2, #3, and #12.<br><br>Findings include:<br><br>Review of the facility policy titled, "Bath, Partial" undated, revealed, "...12. Care of fingernails is | M 610                                                                                          |                                                                                                                          |                                                        |

Mississippi State Department of Health

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

TITLE

(X6) DATE

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| M 610                                                                     | <p>Continued From page 1</p> <p>part of the bath. Be certain nails are clean...13. Fingernails/toenails of diabetic residents are cut by the licensed nurse or podiatrist. Check care plan for specifics..."</p> <p><b>RESIDENT #2</b><br/>An observation on 10/14/25 at 11:35 AM and again on 10/15/25 at 12:05 PM revealed Resident #2's fingernails to be approximately ½ (one-half) inches long and jagged with a brown substance underneath them.</p> <p>On 10/15/25 at 12:10 PM, an interview and observation were conducted with Licensed Practical Nurse (LPN) #1 she stated, "I think the nursing supervisors are responsible for the fingernail care." She confirmed that Resident #2's fingernails were long, jagged, and had a brown substance underneath them and stated, "His nails really needed to be cleaned and trimmed".</p> <p>During an interview and observation on 10/15/25 at 12:30 PM, Certified Nurse Aide (CNA) #1 revealed she is assigned to the resident today but hadn't looked at his fingernails yet. She confirmed that the fingernails were long, jagged, and had a brown substance underneath them. She revealed she may not be able to cut his fingernails, but she can clean underneath them. She acknowledged that his fingernails should also be cleaned when he goes to the shower.</p> <p>Record review of Resident #2's Care Plan revealed that the resident "is at risk for impaired skin integrity related to (r/t) decreased mobility, incontinence, use of briefs, possible falls, thin/frail skin...Approach... Keep finger/toe nails clean, neat and trimmed..."</p> <p>Record review of "Resident Face Sheet" revealed</p> | M 610                                                                                          |                                                                                                                          |                                                     |

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| M 610                                                                     | <p>Continued From page 2</p> <p>the facility admitted Resident #2 on 01/24/2023 with diagnoses that included Atherosclerotic Heart Disease, Alzheimer's, and Type 2 Diabetes Mellitus.</p> <p>Record review of the Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 9/23/25, Section C revealed a Brief Interview for Mental Status (BIMS) score of 3, which indicated Resident #2 has severe cognitive impairment.</p> <p><b>RESIDENT #3</b></p> <p>An observation and interview on 10/14/25 at 12:25 PM, revealed Resident #3's fingernails were approximately ½ (one-half) inches long, jagged and extended past the fingertips. Resident #3 stated, "I would like my nails to be cut shorter. I don't like it when they are this long."</p> <p>A follow-up observation and interview on 10/15/25 at 12:15 PM revealed Resident #3's fingernails remained long, jagged, and unchanged from the previous day. Resident #3 stated, "No one has come to cut my fingernails. Can you ask someone to cut them for me?"</p> <p>During an interview and observation on 10/15/25 at 12:25 PM, with LPN #1 and CNA #1. LPN #1 revealed that Resident #3 is receiving hospice services, and the hospice aide does his bathing and is also responsible for his nail care. CNA #1 confirmed that she is assigned to Resident #3, but the hospice aide typically completes the resident's bathing, which includes cleaning and trimming fingernails. Both LPN #1 and CNA #1 acknowledged that Resident #3's fingernails were long and jagged and needed to be trimmed.</p> | M 610                                                                                          |                                                                                                                          |                                                        |

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| M 610                                                                     | <p>Continued From page 3</p> <p>Resident #3 again stated, "I want my fingernails cut." LPN #1 stated, "With his fingernails being long and jagged, he could scratch his skin and create a skin tear." LPN #1 further stated, "We will talk with hospice, but also make sure he gets his fingernails cut today."</p> <p>An interview on 10/15/25 at 2:30 PM, the Director of Nurses (DON) revealed that when a resident is a diabetic or taking blood thinners, it is the nurse's responsibility to trim the nails and document it in the electronic Medication Administration Record (EMAR). The DON revealed that anyone can clean a resident's fingernails, which is typically done during the resident's bath time. She revealed Resident #2 is a diabetic, and although anyone could have cleaned his fingernails, the nurse should have trimmed his nails. The DON acknowledged that Resident #3 was on hospice services but stated, "The resident's care is ultimately our responsibility, and we should ensure that all aspects of ADL care are being provided to our residents."</p> <p>Record review of Resident #3's Care Plan revealed that the resident "is at risk for impaired skin integrity related to (r/t) decreased mobility, fair skin turgor, possible falls and other risk factors... Approach... Keep finger/toe nails clean, neat and trimmed..."</p> <p>Record review of "Resident Face Sheet" revealed the facility admitted Resident #3 on 09/02/2014 with diagnoses that included Unspecified Dementia and Atherosclerotic Heart Disease.</p> <p>Record review of the MDS with an ARD of 9/23/25 revealed under Section C, a BIMS summary score of 10 which indicated Resident #3</p> | M 610                                                                                          |                                                                                                                          |                                                        |

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| M 610                                                                     | <p>Continued From page 4</p> <p>had a moderate cognitive impairment.<br/>Resident #12</p> <p>An observation on 10/14/25 at 2:18 PM revealed Resident #12's fingernails were approximately one-fourth to one-half inch long with a brown substance underneath.</p> <p>An observation and interview on 10/15/25 at 12:33 PM revealed no change in Resident #12's fingernails. He stated that the staff had not clipped his fingernails in about two weeks or cleaned them. He revealed that he took a shower last night and stated, "I guess they were too busy and didn't have time to do my nails, maybe they will today."</p> <p>During an observation and interview on 10/15/25 at 12:38 PM with LPN #1, she confirmed that Resident #12 had long dirty fingernails. She admitted that Resident #12's scheduled showers were on Tuesdays, Thursdays and Saturdays and that fingernails should be taken care of during that time. LPN #1 confirmed that long dirty fingernails could cause the spread of germs and could cause a skin infection if he scratched himself.</p> <p>During an interview and observation on 10/15/25 at 1:10 PM with CNA #2, she revealed that she was assigned to Resident #12 on this date and confirmed that his fingernails were long and dirty. She stated, "Those nails haven't been touched in a while." And revealed that it was the nurses and aides' responsibility to keep resident fingernails clean. She stated, "If you see it, there should be no question as to who should do it." CNA #2 confirmed that nail care was included in the residents' grooming and personal hygiene needs and were supposed to be taken care of during</p> | M 610                                                                                          |                                                                                                                          |                                                        |

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| M 610                                                                     | <p>Continued From page 5</p> <p>their scheduled shower times. She also revealed that if a resident was a diabetic, the CNA was supposed to report to a nurse that fingernails needed to be clipped, and the nurses would take care of them. CNA #2 revealed that fingernails carry germs and could cause infection.</p> <p>Record review of Resident #12's "Care Plan" revealed that he required mostly extensive assistance and is dependent with ADL's and included an Approach to "Trim nails and provide nail care as scheduled and PRN (as needed)..."</p> <p>Record review of Resident #12's "Resident Face Sheet" revealed that the facility admitted the resident on 05/19/22 with medical diagnoses that included Cerebral Infarction and Type 2 Diabetes Mellitus.</p> <p>Record review of Resident #12's MDS with an ARD of 09/11/25 under Section C, revealed a BIMS Score of 07 which indicated that he had moderate cognitive deficits.</p> | M 610                                                                                          |                                                                                                                          |                                                        |