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 **12/11/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JNH-JAQUITH INN	**3550 HIGHWAY 468 WEST , WHITFIELD, Mississippi, 39193**

(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 a Complaint Investigation (CI), MS #2676710 at the facility from 12/10/25 through 12/11/25. MS #2676710 was investigated related to physical environment and infection control. During the survey, the SA determined the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirement and cited M500.	M0000		
M0500	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 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	M0500		

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

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M0500	Continued from page 1 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 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;	M0500		

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M0500	Continued from page 2 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 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	M0500		

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M0500	Continued from page 3 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 LICENSURE REQUIREMENT is NOT MET as evidenced by: Based on observation, interview, and record review, the facility failed to ensure resident rights to a clean and comfortable environment for three (3) of six (6) sampled residents (Residents #1, #2, and #3). Findings included: A review of the facility's policy "Cleaning of Patient/Resident Areas," dated November 2024, revealed, "…Policy This policy provides procedures to clean and disinfect all patient/resident areas to prevent the spread of infection…Definition A. Cleaning – the removal of foreign material…from surfaces…Procedure…B. Steps to cleaning and disinfecting in a building…2. The following should be free of stains, visible dust, streaks, gross soil, spider webs and handprints. Clean and disinfect as needed. a. Baseboards b. walls…j. door frames…m. paper towel holder…p. furniture q. handrails…Patient/Resident general areas include the following as applicable…Patient/Resident room a. Bed rails as applicable…d. Mirror…Sweep or Dry mop floor to remove all debris or dust a. Spot clean any grossly soiled area…" On 12/10/25 at 2:00 PM, during a telephone interview with the complainant, she reported visiting Resident #1 on 11/23/25 and observing spots and streaks of substances she believed appeared to be blood and saliva on the wall next to his bed. She reported the floors were dirty and the bed was broken. On 12/10/25 at 3:35 PM, during an observation with the Administrator-in-Training (AIT) and Director of Nursing (DON), upon entry into the room shared by Resident #1, Resident #2, and Resident #3, there were ten (10) brown pea-sized spots and two (2) brown streaks measuring approximately four (4) inches long by one-eighth (1/8) inch wide on the door frame. The hallway handrail outside the room to the right and left of the door was sticky to the touch and discolored. Beneath the sink, a two-foot by three-foot (2 × 3) area of flooring had visible dust, debris, and blackish discoloration. The mirror above the sink was streaked with approximately thirty (30) gray streaks measuring one-eighth (1/8) inch wide and ranging from two (2) to five (5) inches in length. The top of the wall-mounted paper towel holder was covered with dust, and the front surface had	M0500		

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M0500	Continued from page 4 brown spots and streaks that wiped away easily with a damp paper towel. The floor behind the door and at the end of Resident #2's bed was covered with lint, dust, scraps of paper, and debris, with brown, black, and rust-colored streaks throughout. The wall adjacent to Resident #2's bed had four (4) black diagonal streaks measuring approximately one-half (½) inch wide by four (4) inches long and an additional tan streak above the bed. Junction boxes and wire mold encasing electrical wiring along the wall behind the beds of Resident #1 and Resident #3 were covered with approximately one-sixteenth (1/16) inch of dust and debris. Resident #1's bedframe was covered with dust that wiped away easily, and the floor beneath the bed was dusty with scattered debris. A seven-inch by seven-inch (7 × 7) structural encasement in the corner of the room had twenty-two (22) maroon-colored streaks measuring two (2) to four (4) feet in length. The baseboard behind the head of bed of Resident #3 and along the far wall was covered with a one-sixteenth (1/16) inch of dust. All three wall-mounted call light boxes were covered with visible dust. The right assist rail on Resident #2's bed had a light brown discoloration that wiped away with a damp paper towel. The room was uncluttered, free from pests and malodorous smells, and all beds were functional. On 12/10/25 at 5:00 PM, during an interview, the Administrator-in-Training reported she had been notified by the family of Resident #1 that the room was dirty during their visit on 11/23/25, specifically noting the walls and floors, and that belongings of a previous resident remained in the room. She confirmed that at the time of Resident #1's admission on 11/21/25, some belongings of the prior resident were still present and that thorough cleaning had not occurred prior to admission. She confirmed she instructed staff to remove the belongings but did not personally inspect the room afterward. On 12/11/25 at 12:50 PM, during an interview, the facility Administrator stated resident rooms should be deep cleaned when a resident leaves and prior to a new admission, with daily cleaning ongoing. He stated the facility used a contracted housekeeping service and that oversight responsibilities rested with administration and nursing leadership. On 12/11/25 at 1:30 PM, during an interview, the Environmental Services Department Supervisor confirmed the accumulated dust, debris, and streaking observed in the room of Resident #1, Resident #2, and Resident #3 were unacceptable and indicated the areas had not been recently cleaned.	M0500		

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M0500	Continued from page 5 Resident #1 A record review of the “Identification and Summary Sheet” revealed the facility admitted Resident #1 on 11/21/25. A record review of the “Physician Orders” for Resident #1 had diagnoses including Neurocognitive Disorder. A record review of the Admission Minimum Data Set (MDS) for Resident #1, with an Assessment Reference Date (ARD) of 11/28/25, revealed a Brief Interview for Mental Status (BIMS) score of three (3), which indicated the resident’s cognition was severely impaired. Resident #2 A record review of the “Identification and Summary Sheet” for Resident #2 revealed the facility admitted the resident on 8/27/18. A record review of the “Quarterly Revised Orders” revealed Resident #2 had diagnoses including Anoxic Brain Injury. A record review of the Quarterly MDS for Resident #2, with an ARD of 11/6/25, revealed a BIMS score of six (6), which indicated the resident’s cognition was severely impaired. Resident #3 A record review of the “Identification and Summary Sheet” for Resident #3 revealed the facility admitted the resident on 6/1/76 and he had diagnoses including Spastic Cerebral Palsy. A record review of the Quarterly MDS for Resident #3, with an ARD of 9/25/25, revealed the resident was rarely or never understood, had a documented memory problem, and was severely impaired for daily decision making.	M0500		