Mississippi State Department of Health

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING<br>B. WING | (X3) DATE SURVEY COMPLETED<br>**02/10/2026** |
|---|---|---|---|

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **GREENBRIAR NURSING CENTER** | **4347 WEST GAY ROAD , DIBERVILLE, Mississippi, 39540** |

| (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 |
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| M0000 | Initial Comments<br><br>The State Agency (SA) conducted two (2) Complaint Investigations (CI MS #2695439 and CI MS #2697548) at the facility from 2/9/26 through 2/10/26. 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 requirements. CI MS #2695439 was investigated for Quality of Care/Treatment and there were no citations. CI MS #2697548 was investigated related to environment and broken equipment and M500 was cited. | M0000 | | |
| M0500 | 45.17.2 Residents' Rights<br><br>Residents' Rights. The residents' rights policies and procedures ensure that each resident admitted to the facility:<br><br>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;<br><br>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;<br><br>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 | M0500 | | |



| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| M0500 | Continued from page 1<br>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;<br><br>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;<br><br>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;<br><br>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;<br><br>7. is free from mental and physical abuse;<br><br>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 | M0500 | | |

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| M0500 | Continued from page 2<br>emergency application of the restraint;<br><br>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;<br><br>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;<br><br>11. is not required to perform services for the facility that are not included for therapeutic purposes in his plan of care;<br><br>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);<br><br>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);<br><br>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);<br><br>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 | M0500 | | |

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| M0500 | Continued from page 3<br><br>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.<br><br>This LICENSURE REQUIREMENT is NOT MET as evidenced by:<br><br>Based on observation, interview, record review, and facility policy review, the facility failed to ensure the residents' right to a clean, comfortable, and homelike environment as evidenced by adequate clean linens and washcloths were unavailable for resident care for one (1) of two (2) survey days.<br><br>Findings include:<br><br>A review of the facility's policy, "Resident Rights," revised February 2023, revealed, "…The resident has the right to a dignified existence…8. Safe environment. The resident has a right to a safe, clean, comfortable, and homelike environment, including…treatment and supports for daily living safely..."<br><br>On 2/9/26 at 10:50 AM, during an observation and interview with the facility owner, linen closets, supply closets, and nurses' station supply rooms were observed. The linen closet on Beach Avenue Hall was observed to contain no towels, washcloths, fitted sheets, blankets, or bed linen pads. Only one item was observed in the linen closet. The owner reported the closets would be filled once laundry staff made rounds.<br><br>On 2/9/26 at 12:21 PM, during an interview, Certified Nursing Aide (CNA) #1 reported wipes were implemented to prevent staff from running out of washcloths. CNA #1 reported that normally each morning staff were without washcloths and towels and the CNA had reported the concern to the charge nurse, Director of Nursing (DON), and Administrator.<br><br>On 2/9/26 at 12:29 PM, during an interview, CNA #2 reported towels, washcloths, and bed sheets were normally restocked daily at approximately 9:00 AM. She reported there had been linen shortages daily for the previous three (3) days and she reported the concern to the charge nurse. She explained that some residents used wipes instead of towels due to the shortage.<br><br>On 2/9/26 at 12:47 PM, during an interview, CNA #3 reported that within the last seven (7) days, on (2) occasions, she did not have washcloths and towels available to prepare residents for breakfast. She | M0500 | | |

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| M0500 | Continued from page 4<br>reported she used a pillowcase or wipes to wash a resident's face or provide perineal care after a bowel movement due to the shortage. She reported she informed the charge nurse, who then informed the DON. She reported delays in receiving washcloths delayed completion of resident care. She reported linen closets were normally restocked around 8:30 AM and required additional restocking after lunch.<br><br>On 2/9/26 at 1:38 PM, during an interview, the Housekeeping Supervisor reported linen closets were refilled (3) times daily, with the last refill occurring at approximately 3:00 PM. She reported there was no overnight laundry shift and laundry staff left at approximately 5:00 PM. She reported the department had been short staffed for approximately (2) months.<br><br>On 2/9/26 at 1:51 PM, during an interview, Resident #1 reported linen shortages occurred daily and he believed there was a high turnover rate in the laundry department. He reported his bed was often made later in the day or after lunch due to linen shortages and reported that at night there were no bed pads or linens available.<br><br>On 2/10/26 at 9:05 AM, during an interview, the DON reported staff had reported linen shortages. She reported linens were sometimes hidden in resident rooms. She explained additional linens were ordered and wipes were implemented due to linen shortages. She reported staff were educated during in-service training regarding not discarding stained linens. She stated linens were ordered weekly and the facility purchased additional towels to accommodate shortages.<br><br>On 2/10/26 at 11:30 AM, during an interview, the Administrator reported that when linens were being replenished or used frequently, she conducted random checks. She explained there had been reports of washcloth shortages and wipes were implemented to prevent depletion and that she came into the facility at 4:00 AM to wash linens because there were no towels available for residents. Linen shortages were discussed during the January skills fair, and the issue had been present for at least six (6) weeks. She reported she believed staff were discarding heavily soiled linens instead of sending them to laundry for cleaning and confirmed there had been an ongoing linen shortage.<br><br>A record review of daily linen issue sheets dated 2/6/26, 2/7/26, 2/8/26, and 2/9/26 revealed all linen closets were noted to be low on the morning shift at the time of inventory. | M0500 | | |