MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	24KI	A. BUILDING: _____ B. WING _____	C 10/01/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE PILLARS OF BILOXI	2279 ATKINSON ROAD BILOXI, MS 39531

(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 two (2) Complaint Investigations (CIs), MS #18120 and MS #18131, from 9/29/21 through 10/1/21. The SA substantiated MS #18120 and M500 was cited. MS #18131 was not substantiated. The facility was not in compliance with the Minimum Standards of Operation for Institutions for the Aged or Infirm and state licensure requirements.	M 000		
M 500 SS=D	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	M 500		11/12/21

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M 500	Continued From page 1	M 500		

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 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

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M 500	Continued From page 2 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; 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	M 500		

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M 500	Continued From page 3 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 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: Based on observation, staff interview, record review and facility policy review, the facility failed to ensure dignity during clothing change for one (1) of four (4) residents. Resident #1. On 9/29/21 at 10:50 AM, during an interview with the Administrator, he stated CNA #2 changed Resident #1's pants in the activity room which did	M 500	1. The Administrator spoke with Resident #1 on 9/17/21 and discussed his rights, personal privacy and the care provided by staff with no concerns or issues voiced. 2. All residents who require assistance with Activities of Daily Living have the potential to be affected by the deficient	

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M 500	Continued From page 4 not provide privacy for Resident #1. On 9/29/21 at 11:00 AM, SA observed the activity room, which is located at the end of a hallway near an exit door, across from the dining room area. The SA observed there is no door to the activity room and noted a small amount of traffic passing by the entrance to the activity room. On 9/29/21 at 11:30 AM, in an interview with License Practical Nurse (LPN) #1 revealed he witnessed CNA #2 assisting Resident #1 into the activity room and noted Resident #1 had changed clothes when he was assisted back to the dining room. On 9/30/21 at 8:00 AM, in an interview with Housekeeping #1 revealed she observed CNA #2 assisting Resident #1 into the activity room and back out of the activity room a few minutes later and that Resident #1's pants were changed. On 9/30/21 at 9:00 AM in an interview with CNA #2 revealed she assisted Resident #1 to the activity room to change his pants. There were no residents or other staff in the activity room. CNA #2 stated "I should have brought him to his room to do that". Record review Resident #1 Face Sheet admitted to the facility on 6/29/21 diagnosis revealed, Schizophrenia, Unspecified Intracranial Injury without loss of Consciousness, Restless, and Agitation. Review of Resident #1 quarterly Minimum Data Set (MDS) dated 9/16/21 Section C, indicated Brief Interview for Mental Status (BIMS) summary score 13, which indicated he is cognitively intact.	M 500	practice. 3. The Social Services Director interviewed all cognitive residents on 10/5/21 to determine if any resident had an issue with a violation of their resident rights, privacy or dignity without any negative findings. The Social Services Director began making weekly observational rounds and conducting resident interviews starting 10/5/21 to ensure resident rights, privacy and dignity were being provided by staff on each unit. The Social Services Director conducted in-service training of all staff regarding resident rights, privacy and dignity beginning 10/19/21 and ending on 10/22/21. 4. The Social Services Director will continue to make weekly observational rounds for four additional weeks beginning 10/22/21 and ending 11/12/21. The Social Services Director will perform observational monitoring monthly for four months starting 11/12/21 and ending 2/28/22 to ensure all residents are afforded their rights, privacy and dignity. The Social Services Director will document findings and take corrective actions as necessary. The Social Services Director will interview 3 cognitive residents from each unit for a total of 12 residents each month for four months beginning 10/5/21 regarding resident rights, privacy and dignity and ending 1/31/22. The Social Services Director will report findings from the resident observations and interviews to the Quality Assurance and Performance Committee monthly beginning 10/28/21	

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M 500	Continued From page 5	M 500	and ending 2/28/22 for review, revision and/or resolution of the plan as necessary.	