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
	57CE	A. BUILDING: _____ B. WING _____	01/30/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CAMELLIA ESTATES	1714 WHITE STREET MCCOMB, MS 39648

(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) conduct an annual recertification survey from 01/28/2020 to 01/30/2020. The SA determined the facility was not in compliance with the Minimum Standards of Operation for Institutions for the Aged or Infirm and cited state statutes at M715 and M815. The census at time of survey was 24, and the facility was certified for 30 beds.	M 000		
M 715	45.24.4 Labeling of drugs Labeling of drugs. Each facility shall follow the Mississippi State Board of Pharmacy labeling requirements. This Statute is not met as evidenced by: Level II Based on observation, staff interview, record review, and facility policy review, the failed to ensure an expired medication was removed from the medication stock, for one (1) of three (3) medication storage areas observed. Findings include: Review of the facility's "Destruction of Unused, Expired or Discontinued Medications" policy, dated 10/2019, revealed: "All outdated, discontinued and/or recalled drugs, and all containers with illegible or no labels will be given to the Director of Nursing (DON) for proper disposition. These will be removed during monthly inspections or any other time as such are found, and will be disposed of according to policy, at least quarterly." On 01/29/2020 at 10:00 AM, during an interview and observation of the medication storage room,	M 715	The bottle of Calcium + Vitamin D was removed ay the Director of Nurses on 1/30/2020. Residents with a physician's order for Calcium + Vitamin D has the potential to be affected. The nursing staff have been in-serviced on 2/1/2020 thru 2/11/2020, by the Director of Nurses on our policy for Medication Storage including storage of expired medications. The Director of Nurses will round weekly beginning 2/3/2020, for expired medications in the medication storage room for four weeks then monthly for two months. Any observed issues will be corrected and then forwarded to the Quality Assurance and Improvement Committee for review any needed	3/13/20

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M 715	Continued From page 1 Licensed Practical Nurse (LPN) #3 revealed a bottle of Calcium 600 milligrams (mg)/Vitamin D, 400 tablets, with an expiration date of 07/2019. LPN #3 stated the medication should have been pulled and destroyed. The LPN #3 revealed the expired medication could cause harm to the resident, if it was given. During an interview, on 01/30/2020 at 12:58 PM, the Director of Nursing (DON) revealed the expired medications should have been pulled, destroyed, and reordered. The DON stated the expired medication may not work effectively if it is out of date. The DON revealed she checks the medication stock rooms monthly or bi-monthly. The DON stated, "I missed it."	M 715	corrective actions or change to the current plan at least quarterly.	
M 815	45.29.1 Safe Food Handling Procedures Safe Food Handling Procedures. Food shall be prepared, held, and served according to current Mississippi State Department of Health Food Code Regulations. This Statute is not met as evidenced by: Level II Based on observation, record review, staff interview and facility policy review the facility failed to ensure the milk and ice cream cooler were kept in a clean and sanitary condition, for two (2) of four (4) kitchen observations. Findings include: A review of the facility's "Sanitation Check List" policy, dated 09/2004, revealed: "The sanitation	M 815	The thermostat on the milk cooler was adjusted by the maintenance supervisor on 1/29/2020. The ice cream freezer was cleaned on 1/29/2020, and later replaced with a new unit on 2/11/2020. All residents who receive ice cream or milk has the potential to be affected. Employees responsible for cleaning the milk cooler and ice cream freezer have been in-serviced by the Dietary Manager on 1/29/2020, on our policy for cleaning	3/13/20

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M 815	Continued From page 2 checklist shall be used as a part of an ongoing program designed to ensure sanitary conditions and to correct an sanitation deficiencies found in the food service department." The sanitation check of the food service department of the storage areas would be done at least monthly by the Dietary Manager or Dietician which would included the refrigerators and freezers. Review of the facility's "Cleaning Instructions Milk Cooler" policy, dated 09/2004, revealed: "POLICY: Equipment shall be maintained in a clean and sanitary condition." A review of the facility's "Sanitary Conditions of the Food Service Department" policy, dated 09/2004, revealed, the dietary manager would develop a master cleaning schedule to include what, when, who, and how the equipment in the kitchen would be cleaned. An observation, on 01/28/2020 at 10:30 AM, during the initial tour of the kitchen, revealed,. the ice cream freezer had frost and ice inside on all four (4) walls. with a temperature of 32 degrees Fahrenheit (F). The ice cream freezer also had water accumulated on the plexi-glass doors. The milk cooler's thermometer was at a temperature 32 degrees (F), with several of the milk cartons frozen. The milk cooler had accumulated ice and frost on all four (4) walls inside the cooler. The top inside of the cooler had clear water droplets that had frozen. During an observation of the kitchen, on 01/29/2020 at 11:31 AM, the milk cooler temperature measured at 28 degrees (F). The milk cooler still had ice and frost accumulation on all four sides, and the top noted with frozen water droplets hanging down. Ice and frost	M 815	and sanitizing the ice cream freezer and milk cooler. The Dietary Manager will round weekly beginning 1/31/2020, to ensure that there is not any ice build up on the milk cooler and no condensation on the ice cream freezer for four weeks and then monthly for two months. Any observed issues will be corrected and then forwarded to the Quality Assurance and Improvement Committee for review any needed corrective actions or change to the current plan at least quarterly.	

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M 815	Continued From page 3 accumulation was also still present in the ice cream freezer, and present on several ice cream cartons. The ice cream freezer temperature measured at 28 degrees (F). During an interview with the Dietary Manager (DM), on 01/29/2020 at 11:25 AM, DM revealed there were schedules in place for monthly defrosting of ice and frost build up in coolers/freezers. The DM revealed there was the ice and frost build up in the ice cream and milk coolers, and frozen water droplets hanging in the milk cooler. The DM could not produce any documentation to indicate when the milk cooler and ice cream freezer had been defrosted or cleaned.	M 815		