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
	54NP	A. BUILDING: _____ B. WING _____	02/13/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SARDIS COMMUNITY NH	613 EAST LEE STREET SARDIS, MS 38666

(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 an annual recertification survey from 02/10/2020 to 02/13/2020. During the survey, the SA determined the facility was not in compliance with the Minimum Standards for the Aged or Infirm requirements of participation. The SA cited the regulatory deficiency M500. At the time of the survey, the census was 55, and the facility held a license for 60 beds.	M 000		
M 500	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	M 500		3/12/20

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M 500	Continued From page 1	M 500		

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 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

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M 500	Continued From page 2 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; 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	M 500		

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M 500	Continued From page 3 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 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: Level II Based on record review, staff interview, and facility policy review, the facility failed to obtain a Urinalysis (U/A) in a timely manner, for one (1) of	M 500	The Urine analysis with reflex ordered on 01/20/2020 and collected on 01/28/2020 by a Licensed Practical Nurse for Resident #53 had the potential to affect Resident #53 by the deficient practice. Resident #53 had no negative outcome due to the	

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M 500	Continued From page 4 16 residents reviewed, Resident #53. Findings include: Review of the facility's "Physician Orders" policy, dated 09/2018, revealed: "It is the policy of this facility that all physician's orders will be implemented timely and carried out in a professional manner." If the order is for lab work, follow-up visits, etc. this information will be placed in the appropriate systems for implementation. Review of Resident #53's Departmental Notes, dated 01/20/2020 at 1:50 PM, revealed the resident was noted with increased confusion with orders to obtain a U/A with Reflex. An entry made on 01/28/2020 at 11:25 PM revealed the U/A was collected, which was eight (8) days later. A review of Resident #53's physician orders, dated 01/20/2020, revealed an order to "Obtain Urine for U/A with Reflex to Culture and Sensitivity (C&S) related to confusion. The order was received and entered into the computer by Licensed Practical Nurse (LPN) #2. Review of the "24-Hour Nursing Report" dated 01/20/2020, revealed Resident #53 needed a U/A. On 02/12/20 at 9:15 AM, during an interview with the Director of Nursing (DON), she stated, "I'm not sure why the specimen was not collected for that long." The DON stated the nurse on the 11 PM to 7 PM shift was responsible for starting the 24 hour report and carrying over everything that should be on it. During an interview, with the Nurse Practitioner,	M 500	deficient practice. All residents have the potential to be affected by the deficient practice. All Resident Physician Orders for a Urine Analysis with reflex and Complete Blood Count laboratory test were audited on 02/18/2020 by the Medical Record Staff and Assessment Nurse for three (3) months prior to 02/01/2020. All nurses were in-serviced on 02/12/2020 by the Director of Nursing or the Infection Preventionist Nurse regarding physician orders with emphasis on new laboratory orders and laboratory services of collection, receiving the lab report and reporting results to the physician/nurse practitioner. The lab tracking book will be completed upon receiving a physician lab order and reviewed in the daily stand up meeting for correctness by the Director of Nursing, Medical Records Staff, and the Infection Preventionist Nurse. All labor orders will be monitored by the Infection Preventionist Nurse beginning 02/17/2020 on a daily basis by bringing the lab tracking book to the Daily Stand Up Meeting and reviewing any lab orders daily for a period of four (4) weeks then bi-weekly for a period of four (4) weeks then monthly for one (1) month or until resolved. The Director of Nursing, Medical Records Staff, and the Infection Preventionist Nurse, will address any concerns and update the corrective action when needed. The Quality Assurance Committee will address any concerns and update the corrective action when needed.	

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M 500	Continued From page 5 on 02/12/2020 at 4:15 PM, she stated, "I would like for the order to be completed within a few days to get the results back to start treating." On 02/13/2020 at 10:30 AM, during an interview, Licensed Practical Nurse (LPN) #2, revealed she received the order for the U/A on 01/20/2020 due to Resident #53 seemed more confused and sleepy. LPN #2 revealed she placed Resident #53 on the bedpan for 20 minutes that day, but was unable to get the sample. LPN #2 stated, "I forgot to chart that." Review of the "Face Sheet" revealed, Resident #53 was admitted by the facility, on 01/09/2020, with diagnoses of Type 2 Diabetes Mellitus, Peripheral Vascular Disease, Chronic Ischemic Heart Disease, Hypertension and Osteoarthritis.	M 500		