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
	41LM	A. BUILDING: _____ B. WING _____	02/05/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TUPELO NURSING AND REHABILITATION CEN	1901 BRIAR RIDGE ROAD TUPELO, MS 38804

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M 000	Initial Comments The State Agency (SA) conducted an annual recertification survey, at the facility, from 02/02/2020 through 02/05/2020. The SA determined the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm. The SA cited state statutes at M225 and M655. The SA identified an Immediate Jeopardy (IJ) and Substandard Quality of Care (SQC), on 02/03/2020, when the facility failed to ensure qualified staff were present 24 hours per day to perform deep suctioning of a Tracheostomy and other emergency procedures if needed, for Resident #99. Schedule review, interviews, and record review, revealed the facility did not have Registered Nurse (RN) or Respiratory Therapist (RT) coverage for all shifts for 137 days, which included 3:00 PM-11:00 PM and 11:00 PM-7:00 AM shifts, that weren't covered. Resident #99 had a diagnosis of Chronic Obstructive Pulmonary Disease (COPD) with a Tracheostomy tube, with orders to suction the tube as needed for excessive secretions. Resident #99 had an Emergency Department visit with a diagnosis of Pneumonia of both lower lobes on 06/20/2019, and was also seen by the Pulmonologist on 01/23/2020, with a diagnosis of Upper Respiratory Infection (URI) and recurrent Pneumonia. The facility's failure to provide 24 hour per day services of a RN or a RT for possible deep suctioning and other emergency Tracheostomy tube needs, had caused, or was likely to cause, serious harm, impairment, or death to residents with a Tracheostomy tube. This affected Resident #99.	M 000		

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M 000	Continued From page 1 The SA identified an IJ and SQC, which began on 03/22/2019, and was present until 02/03/2020, which was for 137 days that the facility did not provide RN or RT coverage for all 24 hours a day shifts. The SA notified the Administrator on 02/03/2020 of the IJ and SQC for the areas of concern. IJ and SQC exited at: M655 - 45.21.11, Special Needs IJ exited at: M225 - 45.4.1, Nursing Facility (Staffing) The facility submitted an acceptable Removal Plan on 02/03/2020, in which the facility alleged all corrective actions were completed on 02/03/2020, and the IJ was removed as of 02/03/2020 related to the Tracheostomy. The SA validated the Removal Plan on 02/04/2020 and determined the IJ was removed prior to exit. Therefore, the scope and severity for M225 - 45.4.1, Nursing Facility Staffing and M655 - 45.21.11, Special Needs, were lowered to a "Level II", while the facility develops and implements a Plan of Correction (POC) and monitors the effectiveness of the systemic changes to ensure the facility sustains compliance with the regulatory requirements. The facility's census was 107, at the time of the survey, and licensed for 120 beds.	M 000		
M 225	45.4.1 Nursing Facility	M 225		2/10/20

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M 225	Continued From page 2 Nursing Facility. To be classified as a facility, the institution shall comply with the following staffing requirements: 1. Minimum requirements for nursing staff shall be based on the ratio of two and eight-tenths (2.80) hours of direct nursing care per resident per twenty-four (24) hours. Staffing requirements are based upon resident census. Based upon the physical layout of the nursing facility, the licensing agency may increase the nursing care per resident ratio. 2. Each facility shall have the following licensed personnel as a minimum: a. Seven (7) day coverage on the day shift by a registered nurse. b. A registered nurse designated as the Director of Nursing Services, who shall be employed on a full time (five [5] days per week) basis on the day shift and be responsible for all nursing services in the facility. c. Facilities of one-hundred eighty (180) beds or more shall have an assistant director of nursing services, who shall be a registered nurse. d. A registered nurse or licensed practical nurse shall serve as a charge nurse and be responsible for supervision of the total nursing activities in the facility during the 7:00 a.m. to 3:00 p.m. and 3:00 p.m. to 11:00 p.m. shift. The nurse assigned to the unit for the 11:00 p.m. to 7:00 a.m. shift may serve as both the charge nurse and medication/treatment nurse. A medication/treatment nurse for each nurses' station shall be required on all shifts. This shall	M 225		

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M 225	Continued From page 3 be a registered nurse or licensed practical nurse. e. In facilities with sixty (60) beds or less, the director of nursing services may serve as charge nurse. f. In facilities with more than sixty (60) beds, the charge nurse may not be the director of nursing services or the medication/treatment nurse. 3. Non-Licensed Staff. The non-licensed staff shall be added to the total licensed staff, to complete the required staffing requirements. 4. There shall be at least two (2) employees in the facility at all times in the event of an emergency. This Statute is not met as evidenced by: LEVEL IV Based on observation, staff interview, resident interview, and facility policy review, the facility failed to provide qualified, consistent and sufficient staff, a Registered Nurse (RN) and/or Respiratory Therapist (RT), 24 hours each day to deep suction the Trach, if needed and/or provide other emergency care to render respiratory care services to a resident with a Tracheostomy (Trach), for one (1) of 1 resident reviewed with a Tracheostomy, Resident #99. Review of the nursing schedule revealed the facility did not have RN or RT coverage for all shifts for 137 days, which included 3 PM- 11 PM and 11PM - 7 AM shifts. Resident #99 had a diagnosis of Chronic Obstructive Pulmonary Disease (COPD) with a Tracheostomy tube, with orders to suction the tube as needed for excessive secretions. Resident #99 had an Emergency Department visit on 06/20/2019, with a diagnosis of Pneumonia of both lower lobes. Resident #99 was also seen by	M 225	1. The facility has ensured Registered Nurse coverage 24 hours per day since 2/2/20 as a result of Resident #99 presence in the facility in the event deep right main stem suctioning is required. There was no harm to the resident related to this deficiency. 2. No other residents have the potential to be affected as Resident #99 is the only resident with a tracheostomy. 3. Upon identification of a lack of Registered nurse coverage on 2/2/2020 by the State Agency (SA), the facility has arranged coverage from that date going forward. The comprehensive care plan for Resident #99 was reviewed and updated on 2/3/20 to reflect that only a Registered Nurse or Respiratory Therapist can perform deep right main stem suctioning.	

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M 225	Continued From page 4 the Pulmonologist on 01/23/2020, with a diagnosis of Upper Respiratory Infection (URI) and recurrent Pneumonia. The facility's failure to provide 24 hour per day services of a RN and/or RT, for possible deep suctioning and other emergency Tracheostomy tube, had caused, or was likely to cause, serious harm, impairment, or death to Resident #99 and other residents with a Tracheostomy tube. The SA identified an Immediate Jeopardy (IJ) and Substandard Quality of Care (SQC), on 02/03/2020, when the facility failed to ensure qualified staff, a RN and/or RT, were present 24 hours per day to perform deep suctioning of a Tracheostomy and other emergency procedures if needed, for Resident #99. The SA notified the Administrator on 02/03/2020 of the IJ and SQC. The facility submitted an acceptable Removal Plan, in which the facility alleged all corrective actions were completed on 02/03/2020, and the IJ was removed as of 02/03/2020. The SA validated the Removal Plan on 02/04/2020 and determined the IJ was removed prior to exit. The scope and severity for the IJ at M225, was lowered to a "Level II", while the facility develops and implements a Plan of Correction (POC) and monitors the effectiveness of the systemic changes to ensure the facility sustains compliance with the regulatory requirements. Findings Include: The facility did not have a policy related to Sufficient Staffing or adequate staffing. Review of the Mississippi State Board of Nursing	M 225	Resident #99 was fully assessed by the Nurse Practitioner on 2/3/2020 and documentation indicated no acute findings or evidence of distress. In-service education was completed on 2/10/2020 with all licensed staff regarding the need for a Registered Nurse or Respiratory Therapist coverage 24 hours per day seven days per week as long as there is a tracheostomy resident in the facility in the event deep right main stem suctioning is required. The Director of Nursing will be responsible for ensuring 24 hour Registered Nurse or Respiratory Therapist coverage. 4. The Registered Nurse or Respiratory Therapist coverage will be reviewed monthly in the Quality Assurance Performance Improvement Committee for three months	

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M 225	Continued From page 5 Laws and Rules Administrative Code Part 2830 Practice of Nursing Title 30: Professions and Occupations Chapter 2, Functions of the Licensed Practical Nurse, (LPN) revealed: Rule 2.1 LPN Supervision, "The LPN gives nursing care which does not require the specialized skill, judgement, and knowledge required of an RN, Advanced Practice Registered Nurse (APRN), Licensed Physician, or Licensed Dentist." Review of the MS State Board of Nursing (BON) website, revealed frequently asked questions (FAQ's). The BON's statement regarding the LPN's scope of practice with Tracheostomy care revealed: "It is within the scope of practice of the LPN to perform Trach care and suction secretions from the Trach tube. However, it is not within the scope of practice for the LPN to perform deep right main stem suctioning. If deep suctioning is required for a patient, a Registered Nurse (RN) must perform the procedure." Review of the facility's working schedule from 03/22/2019 to 02/02/2020, revealed a total of 137 days (3 PM-11 PM, 11 PM- 7 AM shifts), in which there were no documented RN coverage for the facility. The facility did not employ a Respiratory Therapist. The facility readmitted Resident #99 on 06/11/2013, with diagnoses which included Tracheostomy Status, Chronic Obstructive Pulmonary Disease (COPD), Injury at C4 level of Cervical Spinal Cord, and Paraplegia. Review of Resident #99's Quarterly Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 10/25/2019, revealed a Brief Interview for Mental Status (BIMS) score of 15, which indicated full cognitive ability.	M 225		

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M 225	Continued From page 6 On 02/02/2020 at 10:30 AM, an observation and review of the facility's "Daily Nursing Staff Posting" dated 02/02/2020, revealed there was one (1) RN on the 7 AM-3 PM shift, and no RN coverage for the 3 PM-11 PM and 11 PM-7 AM shift. During an interview and observation, on 02/02/2020 at 11:15 AM, Resident #99 was observed lying in bed, alert and oriented. Resident #99 was noted to have a capped trach with speaking valve intact and secured with trach collar. An observation was also made of a suction machine at the resident's bedside. Resident #99 revealed his trach care was done every three (3) days, on Monday, Wednesday, and Friday. Resident #99 stated that he goes to the Pulmonologist every 3 months to have his inner cannula changed. Resident #99 also stated he has had deep suctioning to his trach in the past, but it's been months ago. Resident #99 couldn't recall the exact date or month, nor was he able to recall if a Registered Nurse (RN) or a Licensed Practical Nurse (LPN) that performed the deep suctioning. On 02/02/2020 at 10:40 AM, during an interview, the Director of Nursing (DON) stated they typically have RN coverage on a twenty-four hours a day, and seven days a week (24/7) basis. The DON confirmed they did not have a RN for the 3 PM-11 PM and 11 PM-7 PM shifts for 02/02/2020, didn't have a Respiratory Therapist (RT) in the building to provide emergency care to a resident who has a tracheostomy in the event that emergency care was needed. The DON confirmed she was aware that a resident with a tracheostomy required either an RN or an RT for	M 225		

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M 225	Continued From page 7 deep suctioning. During an interview, on 02/02/2020 at 10:45 AM, the Staff Development Nurse stated, "We have RN coverage during the week, but it varies on the weekends." In an interview with the DON, on 02/03/2020 at 8:45 AM, she stated, "We were so short on staff that I was trying to keep nurses in the building, and I didn't even think about having RN coverage around the clock for the tracheostomy. He's (Resident #99) been here so long that I guess I just wasn't thinking about it." The DON stated they might have an RN scheduled, but if the RN calls in, they have just been replacing her with a Licensed Practical Nurse (LPN). I was aware that we did not have RN coverage 24/7." On 02/02/20 at 12:25 PM, during an interview with the Administrator, he stated that he had served as the interim Administrator since December 2019 and did not think that they had full time RN coverage since he had been here. The Administrator stated the DON should have brought it to his attention that they did not have RN or RT coverage for the care of the Tracheostomy in an event that emergency care was needed. On 02/03/2020 at 9:45 AM, an interview with the Nurse Practitioner (NP), revealed she stated she was aware that the facility had issues with finding an RN. The NP stated they may have had an RN on the schedule, but if the RN called in, they had been replacing the RN with an LPN, which doesn't meet the requirements, due to the resident with the tracheostomy. The NP revealed if something happened, they were close to the hospital and they could be there in five minutes.	M 225		

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M 225	Continued From page 8 On 02/03/20 at 11:25 AM, the DON completed a review of the staffing schedules and time cards for the period of time from March 22, 2019 to February 1, 2020 and it revealed there were 137 days without 24 hour RN or RT coverage for the 3 PM-11 PM and 11 PM-7 AM shifts. The facility submitted an acceptable Removal Plan on 02/03/2020 at 5:30 PM, in which the facility alleged all corrective actions were completed and the IJ was removed on 02/03/2020. The SA validated the removal Plan on 02/04/2020 and determined the IJ was removed on 02/03/2020. Review of the facility's Removal Plan revealed the facility took the following corrective actions to remove the IJ prior to exit: The SA identified an Immediate Jeopardy (IJ) and Substandard Quality of Care (SQC), on 02/03/20, when the facility failed to ensure qualified staff were present 24 hours per day to perform deep suctioning of a Tracheostomy and other emergency procedures if needed, for Resident #99. The facility Executive Director, Director of Nursing and Assistant Director of Nursing were notified 2/3/2020 at 12:10 PM of Immediate Jeopardy (IJ)and Substandard Quality of Care (SQC) due to the facility failure to have a Registered Nurse or Respiratory Therapist available 24 hours per day, 7 days per week to provide deep suctioning in the event emergency care was needed. Resident #99 was admitted to the facility on 06/11/2013 with a tracheostomy. This placed Resident #99 at risk for serious injury, harm, impairment or death. He was identified as the	M 225		

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M 225	Continued From page 9 only resident with a tracheostomy. During the period of March 2019-February 2020 the staffing schedule and time cards revealed 137 days without 24 hour Registered Nurse or Respiratory Therapist coverage for the 3 -11 and 11-7 shifts during the time frame of March 22, 2019 through February 1, 2020. 1. Facility Actions: Upon identification of a lack of Registered Nurse coverage on 02/02/2020 by the State Agency (SA), the Director of Nursing immediately verified Registered Nurse coverage for 02/02/2020 and going forward for each shift for tracheostomy needs for Resident #99. The Medical Director was notified on 02/02/2020 at 12:22 PM of the need for 24 hour coverage by Registered Nurse or Respiratory Therapist by the Director of Nursing. The Medical Director and Attending Physician for Resident #99 was notified of the Immediate Jeopardy and Substandard Quality of Care at 12:28PM on 02/03/2020 by the Director of Nursing. The comprehensive care plan for Resident #99 was reviewed and updated to reflect the Registered Nurse will provide deep suctioning to the tracheostomy if needed per MD orders by the Director of Nursing on 02/03/2020 at 3:00PM. 2. Assessment: Resident #99 was fully assessed by the Nurse Practitioner on 02/03/2020 and documentation signed off at 9:15 AM with no acute findings or evidence of respiratory distress. 3. Quality Assurance: An emergency Quality Assurance Committee meeting was held 02/03/2020 at 3:15 PM to	M 225		

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M 225	Continued From page 10 review and revise the facility policy for tracheostomy suctioning which states that all licensed Nursing Personnel or per State Nurse Practice Act/Respiratory Therapist is to be followed regarding tracheostomy suctioning. Policy has been revised to state that only a Registered Nurse or Respiratory Therapist may perform deep suctioning. In addition, discussion was held regarding the need for 24 hour Registered Nurse or Respiratory Therapist coverage 7 days per week. The Director of Nursing will be responsible for ensuring 24 hours Registered Nurse or Respiratory Therapist coverage 7 days per week. Attendees: Executive Director, Medical Director (via Phone), Director of Nursing, Assistant Director of Nursing, Staff Development, Business office manager and Director of Social Services. 4. In-service: In-service education was initiated on 02/03/2020 by the Staff Development Nurse with all licensed staff regarding the need for a Registered Nurse or Respiratory Therapy coverage 24 hours per day 7 days per week as long as there is a tracheostomy resident in the facility. The Director of Nursing is to be immediately notified of any schedule change to ensure coverage. No licensed nurse will be allowed to work until in-service education is completed to include new hires. The facility policy for tracheostomy suctioning will be reviewed as part of the in-service to ensure licensed staff understand the Mississippi Nurse Practice Act which restricts deep right main stem suctioning to be performed only by a Registered Nurse or Respiratory Therapist. The Facility alleged that the Immediate Jeopardy was removed as of February 3, 2020.	M 225		

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M 225	Continued From page 11 The SA validated the facility's Removal Plan on 02/04/2020: 1. Facility Actions: The SA validated by record review and interview, the Registered Nurse coverage on 02/04/2020, which the Director of Nursing implemented, for the Registered Nurse coverage for 02/02/2020 and going forward for each shift for tracheostomy needs for Resident #99. The SA validated by record review and interview, the Medical Director was notified on 2/02/2020 at 12:22 PM of the need for 24 hour coverage by Registered Nurse or Respiratory Therapist by the Director of Nursing. The SA validated by record review and interview, the Medical Director and Attending Physician for Resident #99 was notified of the Immediate Jeopardy and Substandard Quality of Care at 12:28 PM on 02/03/2020 by the Director of Nursing. The SA validated by record review, the comprehensive care plan for Resident #99 was reviewed and updated to reflect the Registered Nurse will provide deep suctioning to the tracheostomy if needed per MD orders by the Director of Nursing on 02/03/2020 at 3:00 PM. 2. Assessment: The SA validated by interview and record review, Resident #99 was fully assessed by the Nurse Practitioner on 02/03/2020 and documentation signed off at 9:15 AM with no acute findings or evidence of respiratory distress. 3. Quality Assurance:	M 225		

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M 225	Continued From page 12 The SA validated by record review and interview, an emergency Quality Assurance Committee meeting was held 02/03/2020 at 3:15 PM. to review and revise the facility policy for tracheostomy suctioning which stated that all licensed Nursing Personnel or per State Nurse Practice Act/Respiratory Therapist is to be followed regarding tracheostomy suctioning. Policy has been revised to state that only a Registered Nurse or Respiratory Therapist may perform deep suctioning. In addition, discussion was held regarding the need for 24 hour Registered Nurse or Respiratory Therapist coverage 7 days per week. The Director of Nursing will be responsible for ensuring 24 hours Registered Nurse or Respiratory Therapist coverage 7 days per week. Attendees: Executive Director, Medical Director (via Phone), Director of Nursing, Assistant Director of Nursing, Staff Development, Business office manager and Director of Social Services. 4. In-service: The SA validated by record review and interview, in-service education was initiated on 02/03/2020 by the Staff Development Nurse with all licensed staff regarding the need for a Registered Nurse or Respiratory Therapy coverage 24 hours per day 7 days per week as long as there is a tracheostomy resident in the facility. The Director of Nursing is to be immediately notified of any schedule change to ensure coverage. No licensed nurse will be allowed to work until in-service education is completed to include new hires. The facility policy for tracheostomy suctioning will be reviewed as part of the in-service to ensure licensed staff understand the Mississippi Nurse Practice Act which restricts deep right main stem suctioning to be performed only by a Registered	M 225		

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	41LM	A. BUILDING: _____ B. WING _____	02/05/2020

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M 225	Continued From page 13 Nurse or Respiratory Therapist. The SA validated all corrective actions were taken by the facility and the actions were completed as of 02/03/2020 and the IJ was removed on 02/03/2020, prior to exit.	M 225		
M 655	45.21.11 Special needs Special needs. Each resident with special needs shall receive proper treatment and care. These special needs shall include, but are not limited to injections; parenteral and enteral fluids; colostomy, ureterostomy, ileostomy care; tracheostomy care; tracheal suction; respiratory care; foot care; and prostheses. This Statute is not met as evidenced by: LEVEL IV Based on observation, staff interview, resident interview, facility policy review, Mississippi (MS) State Board of Nursing website review, and the Nurse Practice Act, the facility failed to provide consistent respiratory care services to a resident with a Tracheostomy (Trach) by qualified personnel, a Registered Nurse (RN) and/or Respiratory Therapist (RT), 24 hours each day to deep suction the Trach, if needed and/or provide other emergency care related to the Trach, for one (1) of 1 resident reviewed with a Tracheostomy, Resident #99. During a review of the facility's nursing schedule, between March 22, 2019 through February 03, 2020, interview, and record review, the facility did not have Registered Nurse (RN) or Respiratory Therapist (RT) coverage for all shifts for 137 days, which included 3:00 PM-11:00 PM and	M 655	1. The facility has ensured Registered Nurse coverage 24 hours per day since 2/2/20 as a result of Resident #99 presence in the facility in the event deep right main stem suctioning is required. There was no harm to the resident related to this deficiency. 2. No other residents have the potential to be affected as Resident #99 is the only resident with a tracheostomy. 3. Upon identification of a lack of Registered nurse coverage on 2/2/2020 by the State Agency (SA), the facility has arranged coverage from that date going forward. The comprehensive care plan for Resident #99 was reviewed and updated on 2/3/20 to reflect that only a Registered Nurse or Respiratory Therapist can	2/10/20

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M 655	Continued From page 14 11:00 PM - 7:00 AM shifts that weren't covered. Resident #99 had a diagnosis of Chronic Obstructive Pulmonary Disease (COPD) with a Tracheostomy tube, with orders to suction the tube as needed for excessive secretions. Resident #99 had an Emergency Department visit with a diagnosis of Pneumonia of both lower lobes on 06/20/2019 and was also seen by the Pulmonologist on 01/23/2020, with a diagnosis of Upper Respiratory Infection (URI) and recurrent Pneumonia. The facility's failure to provide 24 hours per day services of a RN or a RT for possible deep suctioning and other emergency Tracheostomy tube, had caused, or was likely to cause, serious harm, impairment, or death to residents with a Tracheostomy tube. This affected Resident #99. The SA identified the situation as an Immediate Jeopardy (IJ) and Substandard Quality of Care (SQC), which began on 03/22/2019 and was present until 02/03/2020, which was a total of 137 days that the facility did not provide RN or RT coverage for all 24 hour a day shifts, to provide deep suctioning and/or emergency trach care, if needed, for Resident #99. The SA notified the Administrator on 02/03/2020 of the IJ and SQC. The facility submitted an acceptable Removal Plan on 02/03/2020, in which the facility alleged all corrective actions were completed on 02/03/2020, and the IJ was removed as of 02/03/2020. The SA validated the Removal Plan on 02/04/2020 and determined that the IJ was removed prior to exit. The scope and severity for the IJ and SQC at M655 was lowered to a "Level II", while the facility develops and implements a	M 655	perform deep right main stem suctioning. Resident #99 was fully assessed by the Nurse Practitioner on 2/3/2020 and documentation indicated no acute findings or evidence of distress. In-service education was completed on 2/10/2020 with all licensed staff regarding the need for a Registered Nurse or Respiratory Therapist coverage 24 hours per day seven days per week as long as there is a tracheostomy resident in the facility in the event deep right main stem suctioning is required. The Director of Nursing will be responsible for ensuring 24 hour Registered Nurse or Respiratory Therapist coverage. 4. The Registered Nurse or Respiratory Therapist coverage will be reviewed monthly in the Quality Assurance Performance Improvement Committee for three months	

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M 655	Continued From page 15 Plan of Correction (POC) and monitors the effectiveness of the systemic changes to ensure the facility sustains compliance with the regulatory requirements. Findings include: Review of the facility's "Tracheostomy Suctioning" policy, dated 08/2014, revealed: "Tracheostomy suctioning is done to clear the trachea of secretions. Responsibility: All licensed Nursing Personnel or per state practice act/Respiratory Therapist." Review of the Mississippi (MS) State Board of Nursing Laws and Rules Administrative Code Part 2830 Practice of Nursing Title 30: Professions and Occupations Chapter 2, Functions of the Licensed Practical Nurse, (LPN) revealed: Rule 2.1-LPN Supervision, "The LPN gives nursing care which does not require the specialized skill, judgement, and knowledge required of an RN, Advanced Practice Registered Nurse (APRN), Licensed Physician, or Licensed Dentist." Review of the MS State Board of Nursing (BON) website, revealed frequently asked questions (FAQ's). The BON's statement regarding the LPN's scope of practice with Tracheostomy care revealed: "It is within the scope of practice of the LPN to perform Trach care and suction secretions from the Trach tube. However, it is not within the scope of practice for the LPN to perform deep right main stem suctioning. If deep suctioning is required for a patient, a Registered Nurse (RN) must perform the procedure." Review of Resident #99's Physician's order dated, 02/16/2017, revealed to suction the	M 655		

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M 655	Continued From page 16 resident with a #14 French (FR) Suction Catheter as needed for excessive secretions. The order did not address whether to shallow suction or deep suction, nor who was responsible to carry out this order. Review of the medical record revealed Resident #99 had an Emergency Department visit with a diagnosis of Pneumonia of both lower lobes on 06/20/2019 and was also seen by the Pulmonologist on 01/23/2020 with a diagnosis of Upper Respiratory Infection (URI) and recurrent Pneumonia. Resident #99 was prescribed antibiotics and returned to the facility at that time. Review of the working schedule, from 03/22/2019 to 02/02/2020, revealed a total of 137 days of shifts (3 PM-11 PM, 11 PM-7 AM), in which there was no documented RN coverage for the facility. The facility did not employ a Respiratory Therapist. The facility readmitted Resident #99 on 06/11/2013, with diagnoses which included Tracheostomy Status, Chronic Obstructive Pulmonary Disease (COPD), Injury at C4 level of Cervical Spinal Cord, and Paraplegia. Review of Resident #99's Quarterly Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 10/25/2019, revealed a Brief Interview of Mental Status (BIMS) score of 15, which indicated full cognitive ability. During an observation and interview, on 02/02/2020 at 11:15 AM, Resident #99 was observed lying in the bed, alert and oriented, with a capped trach, which had a speaking valve attached. There was a suction machine noted at his bedside. Resident #99 revealed he has trach care done every three (3) days on Monday,	M 655		

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M 655	Continued From page 17 Wednesday and Friday. Resident # 99 stated he goes to the Pulmonologist every 3 months to have his inner cannula changed at the Pulmonology clinic. Resident #99 stated that he has had deep suctioning to his trach in the past, but it's been months ago. Resident #99 couldn't recall exact date or month, nor recall if the staff that provided deep suctioning, was a Registered Nurse (RN) or a Licensed Practical Nurse (LPN). On 02/02/2020 at 10:30 AM, an observation and review of the facility's "Daily Nursing Staff Posting", dated 02/02/2020, posted in the front lobby, indicated on the 7 AM-3 PM shift, there was one (1) RN for an eight hour shift. An observation of the 3 PM-11 PM and 11 PM-7 AM shift, on the daily staffing, dated 02/02/2020, revealed the facility lacked RN coverage. During an interview, on 02/02/2020 at 10:40 AM, the Director of Nursing (DON) stated they typically have RN coverage on a twenty-four a day, and seven days a week (24/7) basis. The DON confirmed the facility did not have a RN for the 3 PM-11 PM and 11 PM-7 AM shifts for 02/02/2020 and did not have a Respiratory Therapist (RT) in the building to provide emergency care to a resident who has a tracheostomy in the event that emergency care is needed. The DON confirmed she was aware that a resident with a tracheostomy required either an RN or an RT for deep suctioning. The DON stated Resident #99 had not required deep suctioning that she knew of. The DON revealed she reviewed the medical record back until March 2019 and could not find where Resident #99 was deep suctioned by the nursing staff. On 02/02/2020 at 10:45 AM, during an interview with the Staff Development Nurse, she stated,	M 655		

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M 655	Continued From page 18 "We have RN coverage during the week, but it varies on the weekends." On 02/02/2020 at 12:25 PM, during an interview with the Administrator, he revealed that he had served as the interim Administrator since December 2019 and he did not think they have had full time RN coverage since he had been there. The Administrator stated the DON should have brought it to his attention that they did not have RN or RT coverage for the care of the Tracheostomy, in an event that emergency care was needed. During an interview with the DON, on 02/03/2020 at 8:45 AM, she revealed that she didn't even think about having RN coverage around the clock for the tracheostomy. The DON stated Resident #99 had been there so long, that she guessed that she just wasn't thinking about it. On 02/03/2020 at 9:45 AM, during an interview with the Nurse Practitioner (NP), she stated, "I was aware that they have had issues with finding an RN. They may have an RN on the schedule, but if she calls in, they have been replacing the RN with an LPN, which doesn't meet the requirements due to the resident with the tracheostomy. But if something happens, we are close to the hospital and they could be here in five minutes." The NP stated she had worked at the facility for the past seven years, and that Resident #99 had been the only tracheostomy in the building and that he had not been sent out for emergency care due to the lack of an RN or RT in the building to provide deep suctioning. On 02/03/2020 at 11:25 AM, the DON completed review of the staffing schedules and time cards for the period of time from March 22, 2019 to	M 655		

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M 655	Continued From page 19 February 3, 2020, and it revealed there were 137 days without 24 hours RN or RT coverage for the 3-11 and 11-7 shifts. The facility submitted an acceptable Removal Plan on 02/03/2020 for the Immediate Jeopardy (IJ) and Substandard Quality of Care (SQC). Review of the facility's Removal Plan revealed, the facility took the following corrective actions to remove the IJ prior to exit: The SA identified an IJ and SQC, on 02/03/2020, when the facility failed to ensure qualified staff were present 24 hours per day to perform deep suctioning of a Tracheostomy and other emergency procedures if needed, for Resident #99. The facility Executive Director, Director of Nursing and Assistant Director of Nursing were notified 02/03/2020 at 12:10 PM of Immediate Jeopardy (IJ)and Substandard Quality of Care (SQC) due to the facility failure to have a Registered Nurse or Respiratory Therapist available 24 hours per day, 7 days per week to provide deep suctioning in the event emergency care was needed. Resident #99 was readmitted to the facility on 06/11/2013 with a tracheostomy. This placed resident #99 at risk for serious injury, harm, impairment or death. He was identified as the only resident with a tracheostomy. During the period of March 2019-February 2020 the staffing schedule and time cards revealed 137 days without 24 hour Registered Nurse or Respiratory Therapist coverage for the 3-11 and 11-7 shifts during the time frame of March 22, 2019 through February 1, 2020. 1. Facility Actions:	M 655		

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M 655	Continued From page 20 Upon identification of a lack of Registered Nurse coverage on 02/02/2020 by the State Agency (SA), the Director of Nursing immediately verified Registered Nurse coverage for 02/02/2020 and going forward for each shift for tracheostomy needs for Resident #99. The Medical Director was notified on 02/02/2020 at 12:22 PM of the need for 24 hour coverage by Registered Nurse or Respiratory Therapist by the Director of Nursing. The Medical Director and Attending Physician for Resident #99 was notified of the Immediate Jeopardy and Substandard Quality of Care at 12:28PM on 02/03/2020 by the Director of Nursing. The comprehensive care plan for Resident #99 was reviewed and updated to reflect the Registered Nurse will provide deep suctioning to the tracheostomy if needed per MD orders by the Director of Nursing on 02/03/2020 at 3:00PM. 2. Assessment: Resident #99 was fully assessed by the Nurse Practitioner on 02/03/2020 and documentation signed off at 9:15 AM with no acute findings or evidence of respiratory distress. 3. Quality Assurance: An emergency Quality Assurance Committee meeting was held 02/03/2020 at 3:15 PM to review and revise the facility policy for tracheostomy suctioning which states that all licensed Nursing Personnel or per State Nurse Practice Act/Respiratory Therapist is to be followed regarding tracheostomy suctioning. Policy has been revised to state that only a Registered Nurse or Respiratory Therapist may perform deep suctioning. In addition, discussion was held regarding the need for 24 hour Registered Nurse or Respiratory Therapist	M 655		

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M 655	Continued From page 21	M 655		

coverage 7 days per week.
The Director of Nursing will be responsible for ensuring 24 hours Registered Nurse or Respiratory Therapist coverage 7 days per week.
Attendees: Executive Director, Medical Director (via Phone), Director of Nursing, Assistant Director of Nursing, Staff Development, Business office manager and Director of Social Services.

4. In-service:
In-service education was initiated on 02/03/2020 by the Staff Development Nurse with all licensed staff regarding the need for a Registered Nurse or Respiratory Therapy coverage 24 hours per day 7 days per week as long as there is a tracheostomy resident in the facility. The Director of Nursing is to be immediately notified of any schedule change to ensure coverage. No licensed nurse will be allowed to work until in-service education is completed to include new hires.
The facility policy for tracheostomy suctioning will be reviewed as part of the in-service to ensure licensed staff understand the Mississippi Nurse Practice Act which restricts deep right main stem suctioning to be performed only by a Registered Nurse or Respiratory Therapist.

The Facility alleged that the Immediate Jeopardy was removed as of February 3, 2020.

The SA validated the facility's Removal Plan on 02/04/2020:

1. Facility Actions:
The SA validated by record review and interview, the Registered Nurse coverage on 02/04/2020, which the Director of Nursing implemented, for the Registered Nurse coverage for 02/02/2020 and going forward for each shift for tracheostomy

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M 655	Continued From page 22 needs for Resident #99. The SA validated by record review and interview, the Medical Director was notified on 2/02/2020 at 12:22 PM of the need for 24 hour coverage by Registered Nurse or Respiratory Therapist by the Director of Nursing. The SA validated by record review and interview, the Medical Director and Attending Physician for Resident #99 was notified of the Immediate Jeopardy and Substandard Quality of Care at 12:28 PM on 02/03/2020 by the Director of Nursing. The SA validated by record review, the comprehensive care plan for Resident #99 was reviewed and updated to reflect the Registered Nurse will provide deep suctioning to the tracheostomy if needed per MD orders by the Director of Nursing on 02/03/2020 at 3:00 PM. 2. Assessment: The SA validated by interview and record review, Resident #99 was fully assessed by the Nurse Practitioner on 02/03/2020 and documentation signed off at 9:15 AM with no acute findings or evidence of respiratory distress. 3. Quality Assurance: The SA validated by record review and interview, an emergency Quality Assurance Committee meeting was held 02/03/2020 at 3:15 PM. to review and revise the facility policy for tracheostomy suctioning which stated that all licensed Nursing Personnel or per State Nurse Practice Act/Respiratory Therapist is to be followed regarding tracheostomy suctioning. Policy has been revised to state that only a Registered Nurse or Respiratory Therapist may	M 655		

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M 655	Continued From page 23 perform deep suctioning. In addition, discussion was held regarding the need for 24 hour Registered Nurse or Respiratory Therapist coverage 7 days per week. The Director of Nursing will be responsible for ensuring 24 hours Registered Nurse or Respiratory Therapist coverage 7 days per week. Attendees: Executive Director, Medical Director (via Phone), Director of Nursing, Assistant Director of Nursing, Staff Development, Business office manager and Director of Social Services. 4. In-service: The SA validated by record review and interview, in-service education was initiated on 02/03/2020 by the Staff Development Nurse with all licensed staff regarding the need for a Registered Nurse or Respiratory Therapy coverage 24 hours per day 7 days per week as long as there is a tracheostomy resident in the facility. The Director of Nursing is to be immediately notified of any schedule change to ensure coverage. No licensed nurse will be allowed to work until in-service education is completed to include new hires. The facility policy for tracheostomy suctioning will be reviewed as part of the in-service to ensure licensed staff understand the Mississippi Nurse Practice Act which restricts deep right main stem suctioning to be performed only by a Registered Nurse or Respiratory Therapist. The SA validated all corrective actions were taken by the facility and the actions were completed as of 02/03/2020 and the IJ was removed on 02/03/2020, prior to exit.	M 655		