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
	76ME	A. BUILDING: _____ B. WING _____	09/26/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MS CARE CENTER OF GREENVILLE	1221 EAST UNION STREET GREENVILLE, MS 38703

(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 a licensure survey from 09/23/19 to 09/26/19. During the survey the SA determined the facility was not in compliance with the Minimum Standards for The Institutions For The Aged And Infirm. The SA cited the state statute M500. At the time of the survey, the census was 105 , and the facility held a license for 116 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 medical record), is afforded the opportunity to	M 500		11/8/19

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M 500	Continued From page 1 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 facility accept his written delegation of this	M 500		

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M 500	Continued From page 2 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 unopened, unless medically contraindicated (as	M 500		

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M 500	Continued From page 3 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 observation, resident interview, staff interview, and facility policy review, the facility failed to honor Resident #254's dignity and/or preferences to wear underwear instead of adult incontinent briefs. This concern was identified for	M 500	M500 1. Resident #254 was provided a pair of underwear instead of a brief as requested on day of complaint. 2. All continent residents have the potential to be affected if they choose to wear underwear.	

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M 500	Continued From page 4 one (1) of 29 residents observed. Findings include: Review of the facility's policy titled, "Resident Rights Policy", dated November 2016, revealed it is the policy of this facility to provide services based on the following requirements: The facility will treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life recognizing each resident's individuality. The facility will protect and promote the rights of the resident. Observations and interviews, on 09/24/19 at 3:41 PM, and 09/23/19 at 11:08 AM, revealed Resident #254 was wearing adult incontinent briefs. Resident #254 stated he knew when he needed to use the bathroom. An interview, with Resident #254, on 09/24/19 at 2:05 PM, revealed staff started putting a brief on him for bowel movements, then they said they were going to leave the brief on, and he could just use the brief if they couldn't get to him in time. Resident #254 stated he does call, but they don't come, so he has to use the brief. Resident #254 stated the staff has told him to use the "diaper" and they will come change him. Resident #254 stated he has a urinal, but he can't hold it and put it in place; but if they would place it, he can position it to use it. Review of Resident #254's Admission Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 09/25/19, revealed a Brief Interview for Mental Status (BIMS) score of 15, which indicated no cognitive impairment. Further	M 500	3. a. An in-service was provided on 9/30/19 by the Director of Nursing for nursing employees on Resident Rights and Dignity. b. The Resident Rights and Dignity Policy and Procedures were reviewed on 9/26/19 by the Administrator and Director of Nursing with no changes made. c. The Social Services Director will began audits on 10/18/19 of all continent residents with BIMS of 12-15 to ensure the residents choice of wearing underwear vs briefs. d. Social Services will update care plan to reflect resident choice. e. Director of Nurses will update Kiosks for each residents choice. f. Audit on resident choice will be done by the Lead CNAs weekly X4 weeks, then monthly X 2 months. 4. The Social Service Director and Director of Nursing will report findings of audits to the Quality Assurance Performance Improvement Committee monthly. Findings will be addressed with changes made as necessary to ensure continued compliance.	

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M 500	Continued From page 5 review of the MDS revealed Resident #254 was coded to be frequently incontinent of urine, and always incontinent of bowels. An interview, on 09/24/19 at 2:15 PM, revealed Licensed Practical Nurse (LPN) #1 stated Resident #254 had a urinal. LPN #1 also stated they don't have a bowel and bladder training program. On 9/24/19 at 2:24 PM, an interview with the Director of Nursing (DON) revealed she had talked with Resident #254 when he was admitted and was aware that he knew when he needed to go to the bathroom. The DON stated the resident wore a brief when he was admitted from the other facility. The DON agreed this was not right. The DON stated she told the staff when he was admitted that he did not need to be in a brief. The DON stated she was not happy about this. She stated it was their job to promote independence. On 09/24/19 at 3:40 PM, an interview with Resident #254, in the presence of the DON, confirmed the resident's wishes not to wear the incontinent brief. On 09/26/19 at 10:00 AM, an interview with CNA # 1 revealed Resident #254 had a brief on when she made her rounds this morning. She stated he wanted his underwear on, so she changed him.	M 500		