STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255271	A. BUILDING _____ B. WING _____	C 12/04/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LIBERTY COMMUNITY LIVING CTR	323 INDUSTRIAL PARK DRIVE LIBERTY, MS 39645

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F 000	INITIAL COMMENTS A COVID-19 Focused Infection Control Survey and CI MS #17084, CI MS #17304, CI MS #17321, CI MS #17322, CI MS #17324, and CI MS #17325 were conducted by the State Agency (SA) on 12/2/2020 to 12/4/2020. The facility had implemented the CMS and Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19. The SA substantiated CI MS #17321,CI MS #17084, and CI MS #17325 for failure to maintain sufficient staffing related to resident acuity and cited F725.CI MS #17304 was not substantiated for neglect. CI MS #17322 was not substantiated for abuse. CI MS #17324 was not substantiated for Infection Control concerns regarding the use of Personal Protective Equipment (PPE). The census at the time of the survey was 63 with a license for 80 beds.	F 000		
F 725 SS=E	Sufficient Nursing Staff CFR(s): 483.35(a)(1)(2) §483.35(a) Sufficient Staff. The facility must have sufficient nursing staff with the appropriate competencies and skills sets to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care and considering the number, acuity and diagnoses of the facility's resident population in accordance with the facility assessment required at §483.70(e). §483.35(a)(1) The facility must provide services by sufficient numbers of each of the following	F 725		1/26/21

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Electronically Signed | 12/29/2020

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F 725	Continued From page 1 types of personnel on a 24-hour basis to provide nursing care to all residents in accordance with resident care plans: (i) Except when waived under paragraph (e) of this section, licensed nurses; and (ii) Other nursing personnel, including but not limited to nurse aides. §483.35(a)(2) Except when waived under paragraph (e) of this section, the facility must designate a licensed nurse to serve as a charge nurse on each tour of duty. This REQUIREMENT is not met as evidenced by: Based on observation, interviews, record review the facility failed to ensure sufficient staffing was available at all times to meet residents' safety and physical and psychosocial care needs for six (6) of eight (8) days staff schedule reviewed, 9/2/2020, 11/15/2020, 11/25/2020, 11/28/2020, 11/29/2020, and 12/2/2020 with the potential to affect 63 residents care. Findings include: The facility's, "Auditing and Monitoring Process for Sufficient Staffing" policy, dated 9/11/18, revealed the facility has a system in place to monitor staffing requirements. No other policy provided to the State Agency (SA), by the facility, regarding staffing when asked. The Facility Assessment noted the facility would provide sufficient staffing to meet the needs of the residents. Review of the facility's Resident Census and Conditions of Residents provided during the survey revealed the facility had three (3) residents	F 725	1. State Agency entered building on 12/2/2020, facility was notified on 12/04/2020 that there was not sufficient staff for 12/02/2020. When next notified of possible staffing shortage on Decemember 11th, 12th and 13th, Director of Nursing (DON) called Administrator who called Regional Director of Operations. All employees on call sheet were called. Staffing agency was called on December 11th to provide coverage. Staffing agency was able to provide coverage and facility agreed to guarantee two nurses and two certified nursing assistants (C.N.A.)slots for the next two weeks and pay hazard pay. Agency was able to provide needed employees. 2. All resident's have the potential to be affected by this deficient practice. 3. Nurses were in-serviced on staffing on December 14,2020 by Administrator, Quality Assurance and Performance Improvement plan was completed December 14, 2020 by the Administrator.	

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F 725	Continued From page 2 dependent on staff for eating and 59 requiring assistance with eating. The review also revealed that the facility had 40 residents dependent on staff for bathing and 22 requiring assistance with bathing. Residents requiring assistance with toileting was 59 with four (4) additional residents requiring total assistance. The total of 63 residents on 12/2/2020 were housed between two (2) units, the Long Term Care Unit and the Alzheimer's Dementia Unit. On 12/2/2020 at 3:55 PM, the State Agency (SA) entered the facility. The facility had a total of three (3) Certified Nursing Assistants (CNAs), three (3) Licensed Practical Nurses (LPNs) on the main facility with one (1) Registered Nurse (RN), one (1) CNA and one (1) activity aide/CNA on the Memory Care Unit. For the main facility the staff on duty upon entrance was five (5) and one (1) on transport but to return to work this PM. The Memory Care Unit had a total of three (3) staff members on duty. Daily facility census was 63 (with two (2) bed holds) for 12/2/2020. Twelve of the 63 residents were on the Memory Care Unit. The Memory Care Unit has a total of five (5) staff per 24 hours with at least two (2) staff members at all times. Review of the daily staffing sheet consistent with the employees present. On 12/3/2020 at 12:05 PM, an interview with Resident # 6 in Room 412-B denied concerns with abuse and neglect but stated the staff is sometimes slow, but they do come and answer the call lights. Resident #6 denied any other complaints. On 12/4/2020 at 9:17 AM, in an interview with the Assistant Director of Nursing (ADON), stated we have had staffing issues. The last two (2) weeks	F 725	System changes put into place to ensure the problem does not recur include computerized schedules, proper use of daily staffing sheets, and review of staffing in department head meeting. Charge nurses for each shift will notify DON via facility cell phone if sufficient staffing is not in place or call-ins or no-shows occur. Charge nurse for each shift will text DON number of nurses and C.N.A.s so that we may ensure adequate staffing, DON will log calls on call log sheet. 4. Staffing schedules have been placed into Smartlinx on December 23. Assistant Director of Nursing (ADON) started completing daily staffing sheets on December 14 and went back to December 5, ADON will turn in staffing sheets to Administrator. ADON will spot check staffing 3 times per week for 6 weeks then as needed and will document on Staffing Reconciliation Sheet. Administrator will confirm staffing and sign off on sheets. Facility will monitor its performance to ensure solutions are sustained by computing daily required nursing hours to ensure above standard of 2.8. Finding will be presented to Quality Assurance Committee (QA) who will review and make recommendations regarding staffing. QA committee will review monthly for 3 months then as needed.	

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F 725	Continued From page 3	F 725		

have been extremely rough. The Social Worker, Minimum Data Set (MDS) nurse, Director of Nursing (DON), Medical Records, Head of Maintenance, Housekeeping Supervisor are all out with COVID-19. The ADON stated it has been difficult. The ADON stated, the facility has agency nurses to help cover staffing for the facility.

In an interview on 12/4/2020 at 2:10 PM, with the Facility Administrator, he stated they have been running ads on several job boards. He stated the facility offers COVID-19 pay and incentives. He stated the facility normally does not require agency staffing but all the staff had to go out because of them being COVID-19 positive all at once. He stated they continue to try to find new ways to find more staff. He confirmed he was not allowed to stop admitting residents due to the low staffing.

On 12/4/2020 at 2:30 in an interview with the facility ADON, stated she was unable to obtain proof of agency staff working. She stated she had a call in to them to get a copy but still unable to obtain. Stated we are having Human Resources to put out positions on a job board. We are trying to utilize all nursing staff to recruit people they know and to talk to staff that has left to see if they are possible for rehire. We have had people come in and apply for jobs but had to wait until COVID-19 testing supplies were available. Had people to come in for interviews and never showed up. ADON stated when staff was short on the regular nursing home halls the facility would share extra staff from the Memory Care Unit, but there are at least two (2) people left on the Memory Care Unit. The ADON stated the DON will return to work on Monday.

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F 725	Continued From page 4	F 725		

Review of the Alzheimer's Dementia Unit Staffing Grid revealed that unit averages between 9-13 residents and staffing was sufficient for the days reviewed however, review of the Long Term Care Staffing Grid revealed insufficient staff to meet the residents needs on the days reviewed.

Review of the Long Term Care Staffing Grid revealed the following staff were on duty:

On 9/2/2020, the 7/3 shift had 1 RN, 2 LPNs and 3 CNAs; 3/11 Shift - 1 RN, 1 LPN for part of the shift, and 3 CNAs; 11/7 Shift - 0 RN, 1 LPN, and 2 CNAs for a total of 14 staff for a census of 44.

On 11/15/2020, the 7/3 Shift had 1 RN and 3 CNAs; 3/11 Shift - 1 RN and 1 LPN for part of the shift and 3 CNAs; 11/7 Shift - 1 RN, 1 LPN, and 3 CNAs for a total of 10 staff for a census of 46.

On 11/25/2020, the 7/3 Shift had 3 LPNs, and 3 CNAs with 1 additional CNA for part of the shift; 3/11 Shift had 1 LPN and 4 CNAs; 11/7 Shift had 1 LPN and 1 CNA for a total of 14 staff for a census of 49.

On 11/28/2020, the 7/3 Shift had 1 LPN 1 CNA present the entire shift and 1 CNA present part of the shift; 3/11 Shift - 2 LPNs and 2 CNAs; 11/7 had 1 LPN and 1 CNA to equal eight (8) staff members for a census of 44.

On 11/29/2020, the 7/3 Shift had 1 RN, 3 LPNs, and 2 CNAs who were present part of the shift; 3/11 Shift had a RN present part of the shift, 2 LPNs, and 2 CNAs; 11/7 had 1 RN, 1 LPN, and 0 CNAs for a total of 12 staff for a census of 43.

On 12/2/2020, the 7/3 Shift no nurses, 2 CNAs

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F 725	Continued From page 5 with 1 CNA who was present part of the shift; 3/11 Shift had a RN part of the shift, 1 LPN, 3 CNAs; 11/7 Shift had 1 RN, 3 LPNs, 1 CNA with 1 additional CNA part of the shift for a total of 13 staff for a census of 46.	F 725		