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 |
|---|---|---|---|
| | 74BR | A. BUILDING: _____ B. WING _____ | 03/24/2022 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| BILLDORA SENIOR CARE | 314 ENOCHS ST TYLERTOWN, MS 39667 |

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| M 000 | Initial Comments<br><br>The State Agency (SA) conducted an annual recertification survey at the facility from 03/21/22 to 03/24/22. The SA determined the facility was not in compliance with the Minimum Standards of Operation for Institutions for the Aged or Infirm, state licensure requirements and cited M500 and M620. | M 000 | | |
| M 500 SS=D | 45.17.2 Residents' Rights<br><br>Residents' Rights. The residents' rights policies and procedures ensure that each resident admitted to the facility:<br><br>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;<br><br>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;<br><br>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 participate in the planning of his medical treatment, to not be limited in his/her choice of a | M 500 | | 4/29/22 |

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| M 500 | Continued From page 1<br>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;<br><br>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;<br><br>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;<br><br>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 responsibility to the facility for any period of time in conformance with State law; | M 500 | | |

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| M 500 | Continued From page 2<br><br>7. is free from mental and physical abuse;<br>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;<br>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;<br><br>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;<br><br>11. is not required to perform services for the facility that are not included for therapeutic purposes in his plan of care;<br><br>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 documented by his physician or nurse practitioner/physician assistant in his medical | M 500 | | |

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| M 500 | Continued From page 3<br>record);<br><br>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);<br><br>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);<br><br>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<br><br>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.<br><br>This Statute is not met as evidenced by:<br>Level II<br><br>Based on interviews, record review, and facility policy review, the facility failed to ensure residents had readily available and reasonable access to personal funds seven days a week for seven (7) of 29 sampled residents reviewed for personal funds. Resident #2, Resident #3, Resident #4, Resident #17, Resident #19, | M 500 | Preparation and/or execution of this plan does not constitute admission or agreement by the provider that a deficiency exists. This response is also not to be construed as an admission of fault by the facility, it□s employees, agents or other individuals who draft or may be discussed in this response and plan of correction. This plan of correction is | |

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| M 500 | Continued From page 4<br>Resident #20, and Resident #22.<br><br>Findings include:<br><br>A record review of the facility's policy "Resident Personal Funds/Personal Effect", undated, revealed "A. Policies: 1. Residents have the right to manage their own financial affairs ...10. Residents will have access to personal funds daily during normal business hours ..."<br><br>On 03/21/22 at 3:14 PM, during an interview with Resident #3, she told the State Survey Agency (SSA) that she cannot get money on the weekend because there is no one at the facility to get her money. The Business Office Manager (BOM) is the only one that gives the residents their money and she is not here on the weekends.<br><br>On 03/22/22 at 10:00 AM, during the Resident Council Meeting, Resident #3, who is the Resident Council President, reported the personal funds are only available Monday through Friday until 5 PM when the BOM is at the facility. She said she must ask for money either on Friday or Thursday before the weekend to assure she has money if needed. She explained no one has ever told her she could have someone call the BOM when she is not here, and she would come give her money from her personal funds. During the meeting, all residents in attendance confirmed that money is only available from the BOM and is not available on evenings or weekends. The residents reported that no one has ever told them that personal funds should be available every day.<br><br>At 10:10 AM on 03/22/22, Resident #2 was present in the Resident Council meeting. She explained she was told she could not get money | M 500 | submitted as the facility□s credible allegation of compliance.<br><br>M 500<br><br>1. The facility adopted a new policy to ensure that residents funds are available at all times on 4/4/2022. The Quality Assurance Performance Improvement Committee met on 4/6/2022 to review the policy titled Availability of Residents Funds after Business Hours. Resident□s # 2,3,4,17,19,20,22 were informed by the Business Office Manager that their funds would be available to them at all times on 4/5/2022. The facility purchased a lock box that will contain funds. The lock box will be taken to the nursing supervisor at the end of each business day. The nursing supervisor will keep the lock box on the medication cart. Resident Council meeting was held on 4/5/2022 to explain the process to obtain their funds after hours.<br>2. All facility residents that have personal funds managed by the facility have the potential to be affected by this practice. No residents have voiced any complaints regarding their funds.<br>3. The business office manager was educated on the policy for Availability of Residents funds after hours by the Corporate Business Office Manager on 4/4/2022. The lock box should also include the transaction history to ensure the resident has funds available in their account. The education also reviewed that the nursing supervisor should return the lock box at the start of the business day | |

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| M 500 | Continued From page 5<br>on weekends because nobody is available to give out the money. The BOM had told her if she needs money for the weekend, to get it on Friday. She explained she was never told to have a nurse to call the BOM to come to the facility and give them money on the weekend.<br><br>On 03/22/22 at 10:15 AM, Resident #4 was in attendance in the Resident Council meeting. He reported he has a personal fund account at the facility and gets money only on weekdays because the BOM is the only one who gives out money and she is not at the facility after 5 o'clock on weekdays and not at the facility at all on the weekends.<br><br>On 03/22/22 at 10:20 AM, Resident #17 attended the Resident Council meeting. During the resident council meeting, he confirmed he has a personal fund account at the facility, but can only get his money while the BOM is working.<br><br>At 10:25 AM on 03/22/22, Resident #19 was present in the Resident Council meeting. She explained she has a trust fund account at the facility, but she is not able to get her money on the weekends because the business office is closed. She reported she must get any money she wants for the weekend by Friday.<br><br>On 03/22/22 at 10:30 AM, during an interview with Resident #20, she explained she can get her money during the weekdays only and not on the weekends.<br><br>At 10:35 AM on 03/22/22, Resident #22 explained she has always had a personal fund account at the facility and can get money when she asks for it on the weekdays. She reported the BOM is the only one who gives out money and she is not | M 500 | and the business office manager should reconcile any transactions. The facility nurses were educated starting on 4/4/2022 through 4/8/2022 by the Quality Assurance Nurse on the policy for Availability of Residents Funds after hours. Any nurse not scheduled will be educated on policy for Availability of Residents Funds after hours on next scheduled shift. If a resident request funds the nursing supervisor will review the transaction history report to ensure that the resident has the funds available and will disperse the money requested. The resident will also sign acknowledging they received the funds. The next business day the lock box will be taken to the business office manager and any transactions will be reconciled.<br>4. Starting 4/4/2022 and continuing indefinitely the Business Office Manager, Administrator, or Director of Nursing will review the transactions each business day and will follow normal accounting principles. The Activities Director will review this process monthly in the resident council meeting times three months starting 4/28/2022 to ensure that residents have access to their personal funds at all times. Information obtained through monitoring will be reviewed by the Quality Assurance Performance Improvement Committee monthly starting 4/28/2022 and continue times three months. Changes will be made as found necessary to maintain substantial compliance.<br>5. Completion Date 4/29/22 | |

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| M 500 | Continued From page 6 | M 500 | | |

available in the evening or on weekends.

On 03/23/22 at 11:05 AM, during an interview with the BOM, she reported currently she is the only staff member at the facility that residents can get personal funds from. She confirmed residents don't have access to their personal funds after 5:00 PM on the weekdays and not on weekends. But, if someone would call her, she would come to the facility and get the resident their money because she doesn't live far way. She explained she has never told any residents or nurses to call her if they needed money on a weekend. If she is off work for any reason, the Administrator or a staff member will step in and give residents their money per request.

On 03/23/22 at 3:35 PM, during an interview with the Director of Nursing, she confirmed the BOM has always been the only staff member that residents get personal funds from unless she is not here. She confirmed the residents do not have any access to personal funds after 5:00 PM on weekdays and not at all on weekends.

A record review of the facility's "Trust Transaction History" dated March 24, 2022, revealed all residents in attendance of the Resident Council meeting have personal trust fund accounts.

Record review of Resident #2's Quarterly Minimum Data Set (MDS) with Assessment Reference Date (ARD) of 03/09/2022 revealed a Brief Interview for Mental Status (BIMS) score of 15, which indicated the resident is cognitively intact.

Record review of Resident #3's Quarterly MDS with ARD of 03/09/2022 revealed a BIMS score of 15, which indicated the resident is cognitively

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| M 500 | Continued From page 7<br>intact.<br><br>Record review for Resident #4's Quarterly MDS with ARD of 03/11/2022 revealed a BIMS score of 15, which indicated the resident is cognitively intact.<br><br>Record review of Resident #17's Quarterly MDS with ARD of 01/18/2022 revealed a BIMS score of 15, which indicated the resident is cognitively intact.<br><br>Record review of Resident #19's 5-day Prospective Payment System (PPS) MDS with an ARD of 01/17/2022 revealed a BIMS score of 15, which indicated the resident is cognitively intact.<br><br>Record review of Resident #20's 5-day PPS MDS with ARD of 01/17/2022 revealed a BIMS score of 14, which indicated the resident is cognitively intact.<br><br>Record review of Resident #22's 5-Day PPS MDS with ARD of 01/19/2022 revealed a BIMS score of 15 which indicated the resident is cognitively intact. | M 500 | | |