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
	24KI	A. BUILDING: _____ B. WING _____	C 03/16/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE PILLARS OF BILOXI	2279 ATKINSON ROAD BILOXI, MS 39531

(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 Survey Agency (SSA) conducted an annual recertification along with a two (2) Complaint Investigations (CI), MS #18546 and CI MS #18547 from 03/06/2022 through 03/11/2022. During the survey, the SSA determined that the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements at M. The SSA cited M500, M620, M640, M780, M815 and M1210 during the survey. The SSA substantiated CI MS #18546. The SSA substantiated CI MS #18547 related to the palatability of food and cited M855. The census at the time of the survey was 133 with a bed capacity of 180. The SSA returned to the facility on 3/16/22 to investigate CI MS #18593. The SSA did not substantiate the complaint regarding abuse.	M 000		
M 855	45.30.7 Food Preparation Food Preparation. Foods shall be prepared by methods that conserve optimum nutritive value, flavor, and appearance. Also, the food shall be acceptable to the individuals served. A file of tested recipes shall be maintained to assure uniform quantity and quality of products. This Statute is not met as evidenced by: Level II Based on observation, resident and staff interviews, record review and test tray, the facility failed to ensure food was palatable were satisfactory for four (4) of 32 sampled residents. Residents #19, #23, #77 and #83.	M 855	This plan of correction constitutes a written allegation of compliance for the deficiencies cited. Submission of this Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. This Plan of Correction is submitted to meet the requirements established by the State and Federal law.	4/27/22

Mississippi State Department of Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Electronically Signed		04/02/22

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M 855	Continued From page 1 Findings Include: On 03/07/22 03:15 PM in the Resident Council meeting Residents #19, #23 and #83 stated continuously about receiving tasteless food daily. On 3/8/22 at 9:18 AM, in an interview with the Dietary Manager stated he is aware of the bland taste concerns. On 03/06/22 at 11:52 AM, in an interview with Resident # 83, she stated the food does not have any taste. It tastes like it is "right out of the can". On 03/06/22 at 12:08 PM, in an interview with Resident # 77, the resident stated the food does not taste good. On the 3/8/22 at 1:10 PM, the State Agency (SA) received a test tray for lunch. The meal consisted of country fried steak with white gravy, mashed potatoes, baked pork chop, buttered rice, collard greens, and carrots. The collard greens, buttered rice and carrots did not have any taste, were not seasoned, and were not palatable. On 3/9/22 at 11:02 AM, the SA asked the DM about the lunch meal on 3/8/22. The DM stated that he does not like collard greens. He stated the collard greens could use more garlic powder. The DM stated that he will try to put flavor in the food without adding salt. He stated the food could have been seasoned better and the rice could have been cooked a little less. The DM confirmed the food was bland. On 3/11/22 at 11:00 AM, in an interview with the Administrator, she stated there is no policy related to palatable food. She was aware that the residents had complaints related to satisfactory	M 855	1. The Dietary manager met with Residents # 19, 23, 77, and 83 on 04/05/22 to discuss food preferences. 2. All residents in the facility have the potential to be affected by this practice. 3. The Dietary Manager (DM) provided education to the dietary staff on food preparation procedures to include food items prepared according to the menu, production guidelines, and recipes that meet nutritional value and palatability beginning on 04/04/22 and ending on 04/08/22. The Administrator will sample one (1) test tray weekly for 4 weeks, then monthly for three (3) months to ensure the meals being served are palatable and satisfactory beginning on 03/29/22 and ending on 07/01/22. 4. The Administrator will report findings to the facility's Quality Assurance Performance Improvement (QAPI) committee meeting monthly to monitor compliance for a period of three (3) months to end on 07/01/22. The first Quality Assurance Performance Improvement (QAPI) meeting to review findings will be held in April 2022. If the Quality Assurance team identifies non-compliance, the interdisciplinary team will review policies and procedures and submit solutions and/or changes to make as needed and complete further in-service education.	

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M 855	Continued From page 2	M 855		

food temperature and palatability of the food that is served.

Record review of the "Admission Record" for Resident #19, revealed an admission date of 7/1/2019, with diagnoses including Type 2 Diabetes Mellitus and Primary Hypertension.

Record review of Resident #19's Quarterly Minimum Data Set (MDS) with Assessment Reference Date (ARD) of 12/3/21 revealed a Brief Mental Status (BIMS) score of 12, which indicated the resident's cognition is moderately impaired.

Record review of the "Admission Record" for Resident #23, revealed an admission date of 4/21/21 with diagnoses including Atherosclerotic Heart Disease of Native Coronary Artery without Angina Pectoris and Essential Hypertension.

Record review of Resident #23's Quarterly MDS with and ARD of 12/7/21 revealed a BIMS score of 15, which indicated the resident was cognitively intact.

Record review of Resident #77's "Admission Record" revealed a most recent admission date of 10/1/2019, with diagnoses including Pressure Ulcer of left buttock Stage 4, Pressure Ulcer of right buttock Stage 4 and Neuromuscular Dysfunction of Bladder, unspecified.

Record review of Resident #77's Quarterly MDS with an ARD of 1/17/2022 revealed a BIMS score of 15, which indicated the resident was cognitively intact.

Record review of Resident #83's "Admission Record" revealed with an admission date of

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M 855	Continued From page 3 1/29/20, with diagnoses including Chronic Systolic (Congestive Heart Failure) and Diabetes Mellitus due to underlying conditions without complications. Record review of Resident #83's Annual MDS with an ARD of 1/14/2022 revealed a BIMS score of 15, which indicated the resident is cognitively intact.	M 855		