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
	48HM	A. BUILDING: _____ B. WING _____	07/11/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARE CENTER OF ABERDEEN	505 JACKSON ST ABERDEEN, MS 39730

(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 an annual recertification, along with a complaint, MS #15972, from 7/9/19 to 7/11/19. During the survey, the SA determined the the facility was not in compliance with the Mississippi Regulations for Minimum Standards for Institutions for Aged or Infirm with a deficiency cited at M635. The SA did not substantiate MS #15972 for neglect and cited no deficiencies. At the time of survey, the census was 100 and the facility held a license for 120 beds.	M 000		
M 635	45.21.7 Gastric feeding Gastric feeding. Residents who are eating alone or with assistance are not fed by a gastric tube unless their clinical condition indicates that the use of a gastric feeding tube is unavoidable. The residents who are fed by a gastric tube receive the treatment and services to prevent complications or to restore if possible, normal eating skills. This Statute is not met as evidenced by: Level II Based on observation, staff interview, and facility policy review, the facility failed to ensure proper placement of the Percutaneous Endoscopic Gastrostomy (PEG) tube, prior to administration of medications via PEG tube for one (1) of one (1) resident observed during medication pass, Resident #19. The facility had a total of eight (8) residents identified with a peg tube. Findings include: Review of the facility's policy titled, "Administering	M 635	1. Licensed Nurse #1 was immediately in-serviced on July 10, 2019 by the Director of Nursing with return demonstration of verifying the Percutaneous Endoscopic Gastrostomy(PEG)tube placement prior to giving flushes or administering medications. Resident #19 was assessed by Director of Nursing on 7/10/19 through 7/12/19 with no adverse outcomes. 2. The facility has determined that eight residents with PEG tubes have the potential to be affected by this deficient	7/23/19

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M 635	Continued From page 1 Medications Through Nasogastric or Gastrostomy Tube", dated 03/18, revealed, Procedures: 6. Verify proper tube placement by aspirating gastrointestinal contents. On 7/10/19, during the 8:00 AM medication pass, an observation of Licensed Practical Nurse (LPN) #1, revealed she administered medications via a PEG tube to Resident #19 and failed to check for placement of the feeding tube prior to administering the medications. On 7/10/19 at 8:40 AM, during an interview with LPN #1, she stated, "I just messed that all up because I didn't check placement before I gave the meds." The nurse verified placement after administration of medications by aspirating stomach contents. On 7/10/19 at 12:10 PM, an interview with LPN #1, revealed, she should have checked placement by aspirating stomach contents prior to administering the medications to ensure the tube was properly placed. On 7/10/19 at 12:18 PM, an interview with the Director of Nursing (DON), revealed, the nurse should have checked placement prior to giving medications. The DON stated the facility policy requires stomach contents be aspirated. On 7/10/19 at 12:26 PM, an interview with the DON, revealed, the Staff Educator is responsible for staff education, but she was out of the facility at this time. The DON stated LPN #1 attended in-service education on 4/10/2019, provided by the Pharmacy Consultant, that discussed medication administration via a PEG tube and checking placement.	M 635	practice. 3. Licensed Nurses were in-serviced by the Director of Nursing with return demonstration on the facility's Administering Medication Through Gastrostomy Tube policy, starting on July 10, 2019 with completion date on July 23, 2019. A validation checklist was completed for each nurse to determine nurse was performing the procedure correctly,completed on July 23, 2019. No deficient practice was identified. 4. The Director of Nursing or Staff Development will complete random PEG Tube Validation Checklists of nurses for six consecutive weeks beginning July 24, 2019 to ensure nurses are performing the procedure in accordance with our facility's policy on Administering Medications Through Gastrostomy Tube. Nurse competency validation checklist will be done annually and upon hire. Findings will be reported to the Quality Assurance and Improvement Committee by the Director of Nursing for three months for review. Committee will make recommendations or revisions to ensure continued compliance.	

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M 635	Continued From page 2 Review of the Pharmacy in-service sign in sheet, titled, "Med Pass Points", dated 4/10/19, revealed, LPN #1 was in attendance. The topic "Peg Tube Administration" was covered and specifically addressed: "Always check placement of the tube."	M 635		