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
	24GC	A. BUILDING: _____ B. WING _____	08/31/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COASTAL HEALTH AND REHABILITATIION CENTER	1530 BROAD AVE GULFPORT, MS 39501

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M 000	Initial Comments The State Agency (SA) conducted a Complaint Investigation (CI), MS #19518 at the facility from 08/30/22 through 08/31/22. During the survey, the SA determined the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements at M. MS #19518 was not substantiated for failure to administer pain medication. The SA cited M 735 for failure to maintain complete and accurate medical records related to medications. The facility held a license for 180 bed and had a census of 110.	M 000		
M 735	45.25.1 Medical Records Management Medical Records Management. 1. A medical record shall be maintained in accordance with accepted professional standards and practices on all residents admitted to the facility. The medical records shall be completely and accurately documented, readily accessible, and systematically organized to facilitate retrieving and compiling information. 2. A sufficient number of personnel, competent to carry out the functions of the medical record service, shall be employed. 3. The facility shall safeguard medical record information against loss, destruction, or unauthorized use. 4. All medical records shall maintain the following information: identification data and consent form; assessments of the resident's needs by all disciplines involved in the care of the resident;	M 735		10/11/22

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M 735	Continued From page 1 medical history and admission physical exam; annual physical exams; physician or nurse practitioner/physician assistant orders; observation, report of treatment, clinical findings and progress notes; and discharge summary, including the final diagnosis. 5. All entries in the medical record shall be signed and dated by the person making the entry. Authentication may include signatures, written initials, or computer entry. A list of computer codes and written signatures must be readily available and maintained under adequate safeguards. 6. All clinical information pertaining to the residents stay shall be centralized in the resident's medical records. 7. Medical records of discharged residents shall be completed within sixty (60) days following discharge. 8. Medical records are to be retained for five (5) years from the date of discharge or, in the case of a minor, until the resident reaches the age of twenty-one (21), plus an additional three (3) years. 9. A resident index, including the resident's full name and birth date, shall be maintained. This Statute is not met as evidenced by: Level II Based on staff interviews, record review, and facility policy review, the facility failed to maintain a complete and accurate medical record for one (1) of three (3) sampled residents. Resident #1. Findings Include:	M 735	This Plan of Correction does not constitute an admission or agreement by the Provider of the truth of the facts alleged or conclusions set forth in the Statement of Deficiencies. This Plan of Correction is prepared solely because it is required by the provisions of Federal and State Laws.	

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M 735	Continued From page 2 Review of the facility's "Policies and Procedures" with the "Subject: Controlled Substances" and an effective date of 11/30/2014 revealed, " ...Procedure: ...2. When a controlled substance is administered to a resident, it must be recorded on the resident's Medication Sheet as well as a separate Controlled Substance/Schedule II Narcotic Sheet that is created for each prescription..." A record review of Resident #1's "Order Summary Report" with "Active Orders As Of: 8/30/22" revealed a Physician's Order, dated 8/3/22, for "Oxycodone HCL tablet 30 milligrams (MG) give 30 mg by mouth every six (6) hours as needed for chronic pain". A record review of the "Controlled Substances Proof of Use" (Narcotic Sheet created for each prescription) for Resident #1's Oxycodone 30 mg tablets, one (1) tablet was documented as "QTY (Quantity) Used" on "8/1/22 at 0000 (12:00 AM), 8/2/22 at 0000 (12:00 AM), 8/2/22 at 1209 (12:09 PM), 8/2/22 at 18:35 (6:35 PM), 8/3/22 at 0035 (12:35 AM), 8/3/22 at 0630 (6:30 AM), 8/3/22 at 1212 (12:12 PM), 8/3/22 at 600 (6:00 PM), 8/4/22 at 0000 (12:00 AM), 8/4/22 at 0600 (6:00 AM), 8/4/22 at 12 (12:00 PM), 8/4/22 at 6 (6:00 PM), 8/5/22 at 0000 (12:00 AM), 8/5/22 at 0600 (6:00 AM), 8/5/22 at 12:02 (12:02 PM), 8/5/22 at 1820 (6:20 PM), 8/6/22 at 0545 (5:45 AM), 8/6/22 at 1200 (12:00 PM), 8/6/22 at 1800 (6:00 PM), 8/6/22/at 2400 (12:00 AM), 8/7/22 at 0602 (6:02 AM), 8/7/22 at 1200 (12:00 PM), 8/7/22 at 1800 (6:00 PM), 8/8/22 at 0000 (12:00 AM), 8/8/22 at 0600 (6:00 AM), 8/8/22 at 1200 (12:00 PM), 8/8/22 at 600 (6:00 PM), 8/9/22 at 1130 (11:30 AM), 8/9/22 at 600 (6:00 PM), 8/10/22 at 0600 (6:00 AM), 8/10/22 at 1200 (12:00 PM), 8/10/22	M 735	* On August 30, 2022, Resident #1 pain assessment completed by Registered Nurse (RN). On August 31, 2022, Resident #1 was assessed by Director of Nursing, no adverse findings noted. On September 2, 2022, Resident #1 Electronic Medication Administration Record and Controlled Substance Proof of Use form were reviewed for the previous twenty-four (24) hours to ensure accuracy. There were no identified documentation omissions. * All residents have the potential to be affected. * All residents narcotic medication records were checked for documentation on the electronic medication administration record, September 1, 2022, by Licensed Practical Nurse (LPN). On September 1, 2022 seventy-nine (79) narcotic doses administered were documented on the Controlled Substance Proof of Use form. Sixty-five (65) of the seventy-nine (79) narcotic doses administered were documented on the electronic medication administration record. Nursing staff was in-serviced on facility policy "Controlled Substances" by Registered Nurse (RN) to include required documentation, on the electronic medication administration record, as well as on the controlled substance proof of use from beginning September 1, 2022 and ending September 5, 2022.	

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M 735	Continued From page 3 at 1800 (6:00 PM), 8/11/22 at 12A (12:00 AM), 8/11/22 at 6A (6:00 AM), 8/11/11 at 1200 (12:00 PM), 8/11/22 at 6PM (6:00 PM), 8/12/22 at 12A (12:00 AM), 8/12/22 at 6A (6:00 AM), 8/12/22 at 6 (6:00 PM), 8/13/22 at 0600 (6:00 AM), 8/13/22 at 12 (12:00 PM), 8/13/22 at 6 (6:00 PM), 8/14/22 at 0000 (12:00 AM), 8/14/22 at 0600 (6:00 AM), 8/14/22 at 12 (12:00 PM), 8/14/22 at 6 (6:00 PM), 8/15/22 at 1200 (12:00 PM), 8/15/22 at 1800 (6:00 PM), 8/16/22 at 1200 (12:00 PM), 8/16/22 at 1800 (6:00 PM), 8/17/22 at 12A (12:00 AM), 8/17/22 at 6A (6:00 AM), 8/17/22 at 6 (6:00 PM), 8/18/22 at 0000 (12:00 AM), 8/18/22 at 0600 (6:00 AM), 8/18/22 at 12 (12:00 PM), 8/18/22 at 6 (6:00 PM), 8/19/22 at 0000 (12:00 AM), 8/19/22 at 1200 (12:00 PM), 8/19/22 at 1800 (6:00 PM), 8/20/22 at 12A (12:00 AM), 8/20/22 at 6A (6:00 AM), 8/20/22 at 1200 (12:00 PM), 8/20/22 at 1800 (6:00 PM), 8/21/22 at 12A (12:00 AM), 8/21/22 at 6A (6:00 AM), 8/21/22 at 12PM (12:00 PM), 8/23/22 at 0000 (12:00 AM), 8/23/22 at 1200 (12:00 PM), 8/23/22 at 630 (6:30 PM), 8/24/22 at 1200 (12:00 PM), 8/24/22 at 1800 (6:00 PM), 8/25/22 at 600 (6:00 PM), 8/26/22 at 06:06 (6:06 AM), 8/26/22 at 12 (12:00 PM), 8/26/22 at 6 (6:00 PM), 8/27/22 at 0600 (6:00 AM), 8/27/22 at 600 (6:00 PM), 8/28/22 at 0000 (12:00 AM), 8/28/22 at 0600 (6:00 AM), 8/28/22 at 1200 (12:00 PM), 8/28/22 at 6 (6:00 PM), 8/29/22 at 0600 (6:00 AM), 8/29/22 at 1200 (12:00 PM), and 8/29/22 at 0600 (6:00 PM)". A record review of the "Individual Resident Narcotic Record" (Narcotic Sheet created for prescriptions received from back-up pharmacy) for Resident #1's Oxycodone 15 mg "Amount Given" as "2" on "8/22/22 at 1230 (12:30 PM), 8/23/22 at 610 (6:10 PM), and 8/23/22 at 0000 (12:00 AM)."	M 735	* Medical Records Licensed Practical Nurse (LPN) will monitor fifty percent (50%) of electronic medication administration recorded and narcotic documentation on the Controlled Substance Proof of Use form, daily Monday through Friday for one (1) week. Then weekly times three weeks, then monthly times three months. Monitoring began September 1, 2022. After four (4) weeks (9/28/22), findings from monitoring of electronic medication administration record and narcotic documentation on the Controlled Substance Proof of Use form will be brought to the Quality Assurance Peformance Improvement Committee Meeting by Director of Nursing on October 6, 2022 to discuss findings and make necessary changes as indicated, then quarterly times three (3) quarters. Quality Assurance Performance Improvement Committee Meeting was held August 31, 2022.	

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M 735	Continued From page 4 A record review of the eMAR for Resident #1 for August 2022 revealed there was no documentation of Oxycodone 30 mg tablets being administered on 8/1/22 at 0000 (12:00 AM), 8/2/22 at 0000 (12:00 AM), 8/2/22 at 1209 (12:09 PM), 8/2/22 at 18:35 (6:35 PM), 8/3/22 at 0035 (12:35 AM), 8/3/22 at 0630 (6:30 AM), 8/3/22 at 1212 (12:12 PM), 8/3/22 at 600 (6:00 PM), 8/4/22 at 0000 (12:00 AM), 8/4/22 at 0600 (6:00 AM), 8/4/22 at 12 (12:00 PM), 8/4/22 at 6 (6:00 PM), 8/5/22 at 0000 (12:00 AM), 8/5/22 at 0600 (6:00 AM), 8/5/22 at 12:02 (12:02 PM), 8/5/22 at 1820 (6:20 PM), 8/6/22 at 0545 (5:45 AM), 8/6/22 at 1200 (12:00 PM), 8/6/22 at 1800 (6:00 PM), 8/6/22/at 2400 (12:00 AM), 8/7/22 at 0602 (6:02 AM), 8/7/22 at 1200 (12:00 PM), 8/7/22 at 1800 (6:00 PM), 8/8/22 at 0000 (12:00 AM), 8/8/22 at 0600 (6:00 AM), 8/8/22 at 1200 (12:00 PM), 8/8/22 at 600 (6:00 PM), 8/9/22 at 1130 (11:30 AM), 8/9/22 at 600 (6:00 PM), 8/10/22 at 0600 (6:00 AM), 8/10/22 at 1200 (12:00 PM), 8/10/22 at 1800 (6:00 PM), 8/11/22 at 12A (12:00 AM), 8/11/22 at 6A (6:00 AM), 8/11/11 at 1200 (12:00 PM), 8/11/22 at 6PM (6:00 PM), 8/12/22 at 12A (12:00 AM), 8/12/22 at 6A (6:00 AM), 8/12/22 at 6 (6:00 PM), 8/13/22 at 0600 (6:00 AM), 8/13/22 at 12 (12:00 PM), 8/13/22 at 6 (6:00 PM), 8/14/22 at 0000 (12:00 AM), 8/14/22 at 0600 (6:00 AM), 8/14/22 at 12 (12:00 PM), 8/14/22 at 6 (6:00 PM), 8/15/22 at 1200 (12:00 PM), 8/15/22 at 1800 (6:00 PM), 8/16/22 at 1200 (12:00 PM), 8/16/22 at 1800 (6:00 PM), 8/17/22 at 12A (12:00 AM), 8/17/22 at 6A (6:00 AM), 8/17/22 at 6 (6:00 PM), 8/18/22 at 0000 (12:00 AM), 8/18/22 at 0600 (6:00 AM), 8/18/22 at 12 (12:00 PM), 8/18/22 at 6 (6:00 PM), 8/19/22 at 0000 (12:00 AM), 8/19/22 at 1200 (12:00 PM), 8/19/22 at 1800 (6:00 PM), 8/20/22 at12A (12:00 AM), 8/20/22 at 6A (6:00 AM), 8/20/22 at 1200 (12:00 PM), 8/20/22 at 1800 (6:00 PM), 8/21/22 at 12A (12:00 AM), 8/21/22 at	M 735		

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M 735	Continued From page 5 6A (6:00 AM), 8/21/22 at 12PM (12:00 PM), 8/23/22 at 0000 (12:00 AM), 8/23/22 at 1200 (12:00 PM), 8/23/22 at 630 (6:30 PM), 8/24/22 at 1200 (12:00 PM), 8/24/22 at 1800 (6:00 PM), 8/25/22 at 600 (6:00 PM), 8/26/22 at 06:06 (6:06 AM), 8/26/22 at 12 (12:00 PM), 8/26/22 at 6 (6:00 PM), 8/27/22 at 0600 (6:00 AM), 8/27/22 at 600 (6:00 PM), 8/28/22 at 0000 (12:00 AM), 8/28/22 at 0600 (6:00 AM), 8/28/22 at 1200 (12:00 PM), 8/28/22 at 6 (6:00 PM), 8/29/22 at 0600 (6:00 AM), 8/29/22 at 1200 (12:00 PM), and 8/29/22 at 0600 (6:00 PM). There was no documentation of Oxycodone 15 mg tablets being administered on 8/22/22 at 1230 (12:30 PM), 8/23/22 at 610 (6:10 PM), and 8/23/22 at 0000 (12:00 AM). This was a total of 88 entries documented as removed by a nurse on the Narcotic Sheet, for Resident #1, in which there was no corroborating documentation on the electronic Medication Administration Record (eMAR) that the medication was administered to the resident. On 08/30/22 at 9:00 AM, during an interview with the Director of Nurses (DON), she confirmed that Resident #1 had a Physician Order for Oxycodone 30 mg and the staff had removed and signed out the medication on the Narcotic Sheet, but the staff did not record on the eMAR that the medication was actually administered to the resident. The DON stated the staff should record on medication administration on the eMAR for good clinical communication and an accurate reflection of the care provided to the resident. The DON confirmed that the facility nurses should document on both the Narcotic Sheet and eMAR because the eMAR is the legal document. The eMAR reflects the pain level for the resident and the effectiveness of the pain medication. On 08/31/22 at 11:00 PM, in an interview with the	M 735		

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M 735	Continued From page 6 facility's Pharmacist, he confirmed that the Narcotic Sheet and the eMAR should match in relation to the date and time administered. On 08/31/22 at 1:00 PM, in an interview with the facility's Physician, he confirmed that pain medication administration should be documented on the eMAR. He reviews the eMAR to obtain an accurate assessment of pain medication effectiveness for residents. He stated that it is the facility's policy for nursing staff to document on the eMAR and "It is a legal record." A record review of the "Admission Record" revealed the facility admitted Resident #1 on 07/17/14 with diagnoses of Spondylopathy and Chronic Pain Syndrome. A record review of Resident #1's Quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 07/21/22, revealed she had a Brief Interview of Mental Status (BIMS) score of 15, which indicated she is cognitively intact.	M 735		