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
	76AA	A. BUILDING: _____ B. WING _____	09/21/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RIVER HEIGHTS HEALTHCARE CENTER	402 ARNOLD AVENUE GREENVILLE, MS 38701

(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 re-certification survey at the facility from 9/18/22 to 9/21/22. The SA determined that the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm and cited M 610. At the time of the survey the facility had a census of 39 and is licensed for 60 beds.	M 000		
M 610 SS=D	45.21.2 Activities of daily living Activities of daily living. Each resident shall receive assistance as needed with activities of daily living to maintain the highest practicable well being. These shall include, but not be limited to: 1. Bath, dressing and grooming; 2. Transfer and ambulate; 3. Good nutrition, personal and oral hygiene; and 4. Toileting. This Statute is not met as evidenced by: Level II Based on observations, resident and staff interviews, record review, and facility policy review, the facility failed to provide Activities of Daily Living (ADL) care to a dependent resident as evidenced by the resident having long fingernails and long toenails on her big toes for one (1) of 12 dependent residents reviewed for ADL care. Resident #2 Findings include:	M 610	The following plan of corrections constitutes the facilities allegation of compliance such that all alleged deficiencies cited have been and will be corrected by the date or dates indicated. The statements made on the plan of correction are not an admission to, and does not constitute an agreement with alleged deficiencies herein. We respectfully submit that these deficiencies do not exist. To remain in compliance with all State and Federal regulations, the facility has taken or will take the actions	10/17/22

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M 610	Continued From page 1 Review of the facility policy titled, "Care of Fingernails/Toenails," with a revised date of October 2010, revealed, "Purpose: The purposes of this procedure are to clean the nail bed, to keep nails trimmed, and to prevent infections." An observation and interview on 09/18/22 at 4:45 PM, with Resident #2 revealed that her fingernails and toenails had not been trimmed in over a month or two. Resident#2 revealed she wanted her fingernails and toenails cut and does not like them long. Her fingernails were observed to be approximately ½ inch long, past the fingertips on both of her hands and were uneven, with wavy edges, and the nail on both of her big toes were observed to be approximately ½ inch beyond the tip of the toes. The nails on the other toes were not long. An observation and interview on 9/19/22 at 9:00 AM, with Resident #2 revealed she still had fingernails with wavy edges that extended approximately ½ inch past the fingertips on both of her hands. Resident was observed to be wearing shoes and revealed the nails on her big toes had not been cut yet. An observation and interview on 9/19/22 at 2:50 PM, with the Certified Nurse Aide (CNA)#1 who was assigned to Resident #2, revealed she was not responsible for trimming Resident #2's fingernails and toenails. She stated the shower aides were responsible for cutting the residents' nails when they are taken to the shower, unless a resident was a diabetic. CNA #1 noted that a CNA could not do diabetic nail care and the nurse would do the care. CNA #1 confirmed Resident #2 had long fingernails, with wavy edges, that extended ½ past the tips of fingers and her nail on each of her big toes extended ½ inch beyond	M 610	set forth in the following plan of correction. * Nail care for resident #2 was provided on 9/20/2022 by facility Registered Nurse,(treatment nurse). * All residents have the potential to be affected by this deficient practice. * The Director of Nursing checked all resident nails on 9/20/2022 to ensure adequate and timely nail care is provided. Twelve residents were identified as needing nail care provided. RN treatment nurse provided the needed nail care to these twelve residents on 9/21/2022. All Licensed nursing staff received additional education regarding adequate and timely nail care on 9/21/22 by the Director of Nursing Services. * On 9/28/2022 the facility charge nurse will monitor 3 residents 3 times per week for a period of 8 weeks to ensure adequate and timely nail care is being provided. On 9/28/2022 The Director of Nursing services will monitor three residents 1 time per week for 8 weeks to ensure adequate and timely nail care is provided. the results of these audits will be presented to the Quality Assurance Committee on 10/14/2022, and then reviewed monthly for 90 days or until issue is resolved.	

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the tip of the toes.

An interview on 9/19/22 at 2:55 PM, with the Licensed Practical Nurse (LPN) #1 confirmed Resident #2 had long fingernails with wavy edges, that extended ½ inch past the tips of fingers and the nail on her big toes extended ½ inch past the tip of her big toes. She revealed the Treatment Nurse was the Registered Nurse (RN) responsible for cutting Resident #2's nails because Resident #2 had a diagnosis of diabetes.

An interview on 9/19/22 at 2:57 PM, with the Treatment Nurse revealed Resident #2 was not on her list of residents to provide diabetic nail care.

An interview on 9/19/22 at 3:00 PM, with LPN #1 confirmed Resident #2's fingernails and toenails should have been trimmed to avoid the likelihood of injury and/or infection from a scratch or possible injury from pressure on her toenails when wearing shoes.

An interview on 9/19/22 at 3:15 PM, with the Director of Nursing (DON) revealed an RN could cut the nails of a resident that had a diagnosis of diabetes. She confirmed Resident #2 should have her fingernails and toenails trimmed by an RN, that her fingernails should have been cut to avoid the resident scratching and injuring herself, and her toenails should have been cut to avoid possible injury or infection to resident's big toes while attempting to wear shoes that may push against her long toenails.

An interview on 9/20/22 at 05:15 PM, with the Administrator (ADM) confirmed Resident #2 should have been receiving proper diabetic nail

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care from an RN and her fingernails and toenails should have already been trimmed.

Record review of the Face Sheet revealed Resident #2 was admitted to the facility on 12/24/20 and had diagnoses that included Cerebral Infarction, Unspecified, Hemiplegia and Hemiparesis Following Cerebral Infarction Affecting Left Dominant Side, Type two (2) Diabetes Mellitus Without Complications, Contracture of Muscle, Left Upper Arm, Foot Drop, Left Foot, Difficulty in Walking, Not Elsewhere Classified, Other Lack of Coordination, and Muscle Weakness (Generalized).

Record review of Resident #2's last Podiatry consult revealed Resident #2 had a Podiatry visit and evaluation on 04/21/22. The Podiatry documentation did not indicate that Resident #2's toenails were cut.

Record review of the "Departmental Notes," dated 4/21/2022 at 1:43 PM, revealed "The Podiatrist made rounds today. He cut and trimmed toenails. No new orders noted."

Record review of the Resident #2's Physician Orders revealed there was no order for Diabetic nail care.

Review of Section C of a quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 9/9/2022 for Resident #2 revealed a Brief Interview for Mental Status score of 14, indicating Resident #2 is cognitively intact.