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 09/13/2022

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 Agency (SA) conducted a Complaint Investigations (CI), MS #19537, at the facility from 9/12/2022 to 9/13/2022. 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 requirement. The SA substantiated MS #19537 related to physical environment and cited M1210.	M 000		
M1210	45.40.7 Walls and Ceilings Walls and Ceilings. All walls and ceilings shall be of sound construction with an acceptable surface and shall be maintained in good repair. Generally the walls and ceilings should be painted a light color. This Statute is not met as evidenced by: Based on observations, staff interviews, record review, and facility policy review, the facility failed to maintain and provide a clean, sanitary, and home-like environment for six (6) of 26 rooms located on the Rehabilitation Unit. Room #303, Room #304, Room #311, Room #314, Room #323, and Room #327. The deficient practice had the potential to impact 26 Residents residing on the Rehabilitation Unit. Findings Include: Record Review of the facility's policy "Resident Rights" dated 11/23/2016, revealed, " ...It is the policy of this facility to promote the rights of residents residing in this facility... Procedure ...2. The facility will make every effort to provide resident homelike environment based on his/her preferences, age, etc ..." Record Review of the facility's policy	M1210	1. The Administrator and Administrator in Training (AIT) spoke with residents #1, #2, #4, and #7 to address the environmental concerns regarding rooms 303, 304, 311,and 327. All resident's were explained their right to a safe, clean, and comfortable home-like environment and were explained the plan to make the necessary repairs to the areas in the room that impacted those rights. The toilet tank cover in room 311 was replaced on 9/14/2022 by Maintenance. The cold water knob in room 304 was replaced on 9/15/2022 by Maintenance. The ceiling in room 311 was assessed for current leaks. None were found. Ceiling was sanded and painted on 10/02/2022 by Maintenance. The air conditioner cover in room 314 was replaced by Maintenance on 9/14/2022. Repairs to the walls in all rooms were initiated on 9/14/2022 and will be	10/22/22

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M1210	Continued From page 1 "Maintenance Service" dated June 2000 revealed " ...It is the policy of this facility that maintenance service be provided to all areas of the building, grounds, and equipment. Procedure 1. The maintenance department is responsible for maintaining the buildings. grounds, and equipment in a safe and operable manner at all times; 2. The following functions are performed by maintenance, but are not limited to: a. Maintaining the building in compliance with current federal, state, and local law regulations and guidelines; b. Maintaining the building in good repair and free from hazard; ... j. Providing routinely scheduled maintenance service to all areas ..." Record Review of the "Job Description" for "Job Title: Maintenance Supervisor" revealed, "SUMMARY To ensure the building(s), equipment, and utilities are maintained and to ensure repairing of physical structure of buildings ... ESSENTIAL DUTIES AND RESPONSIBILITIES include ...Effectively handle resident service requests and correct with 24 hours when possible ...Perform repairs such as painting and performing structural repairs to masonry, woodwork and furnishings of the facility ..." Room 303 On 9/12/22 at 4:00 PM, during an observation and interview with Resident #4 in Room 303, The wall around the air condition unit had a dry white wall patch. The paint was also chipping off the wall and the majority of the wall was painted yellow. Resident #4 confirmed her room had dry, white patched spots on the wall and around the air conditioning unit. Resident #4 said the facility floods when it rains, and the water comes into the	M1210	completed by 10/02/2022 by the Maintenance Supervisor and the Maintenance Assistant. 2. All residents have the potential to be affected by deficient environmental practice that can impact their right to a safe, clean and comfortable home-like environment. 3. Administrator/Administrator-in-Training (AIT) along with Maintenance Supervisor collaborated on 9/14/2022 to prioritize repairs for environmental issues in rooms 303, 304, 311, 314, 323, and 327. The Administrator/AIT along with the Maintenance Supervisor will inspect other resident rooms weekly beginning 9/14/2022 and until 12/31/2022 to ensure these issues are not systemic to the facility in order to protect residents from similar situations. 4. The facility will monitor these environmental issues to ensure the plan of correction is sustained by conducting weekly environmental rounds starting on 9/14/2022 and conducted by department heads on all applicable resident rooms to identify deficient environmental practices. These findings will be recorded in the Maintenance Request Log books upon completion of rounds and will be discussed in monthly Quality Assessment and Performance Improvement (QAPI) meetings beginning 9/30/2022 and until 12/31/2022. These findings will be compared to the environmental rounds book and to the Maintenance Request Log	

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M1210	Continued From page 2 rooms around the air condition units on the floor. She has complained several times about the water coming into the building, and the staff will clean it up, but there is nothing done prevent the water from coming into the room. Record review of the "Admission Record" revealed the facility admitted Resident #4 on 9/1/22 with a diagnosis of Acute on Chronic Diastolic (Congestive) Heart Failure. Record review of the Comprehensive Minimum Data Set (MDS) with an Assessment Reference Date of 8/8/22 revealed Resident #4 had a Brief Interview of Mental Status (BIMS) score of 15, which indicated she was cognitively intact. Room 304 On 9/12/22 at 3:30 PM, during an observation and interview with Resident #7 in Room 304, the base board molding was detached from the wall with chipped sheet rock broken into pieces. The room was also observed with white dry wall patches around the air conditioning unit and behind the head of the Residents bed. Most of the room was painted yellow. The cold-water knob on the sink was broken. Resident #7 confirmed the facility failed to repair the base board, paint the room, repair the cold-water knob, and repair the broken sheet rock around the air conditioning unit. Resident #7 said that the last time it rained, his room was flooded, and the water was also in his bathroom. He had complained to several staff members of his concerns with the room, and nothing was done. Record review of the "Admission Record" revealed the facility admitted Resident #7 on 9/16/2020, with a diagnosis of Cervical Spinal	M1210	books to ensure any environmental issues have been addressed with an immediate plan of correction for any issue unresolved beginning on 9/30/2022 and ending 12/31/2022. Administrator/AIT along with the Maintenance Supervisor will monitor rooms 303, 304, 311, 314, 323, and 327 beginning 9/14/2022 to ensure corrections/repairs are maintained monthly or as often as needed until 12/31/2022.	

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M1210	Continued From page 3 Cord Quadriplegia. Record review of the Quarterly MDS with an ARD of 7/13/22 revealed Resident #7 had a BIMS score of 15, which indicated he was cognitively intact. Room 311 On 9/12/22 at 3:45 PM, during an observation and interview with Resident #1 and Resident #2 in Room 311, the dry wall around the air conditioning unit had a hole and some of the dry wall was missing. There was a large hole behind the entrance door and the toilet did not have a tank top and the water was exposed. Large brown spots on the ceiling were observed. Both residents confirmed the dry wall around the air conditioning unit had a hole in it. They commented that the hole behind the entrance door was there when they moved into the room. Resident #1 and Resident #2 complained about not having a lid or top to the water tank on the back of the toilet and both expressed that they were offended to stay in a room with this type of problems. They commented that when it rains, the room floods from the floor near the air conditioning unit. Record review of the "Admission Record" revealed the facility admitted Resident #1 on 7/26/2022 with a diagnosis of Displaced comminuted Fracture of shaft of right Femur. Record Review of the Comprehensive Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 8/2/22, revealed that Resident #1 had a Brief Interview of Mental Status (BIMS) score of 13, which indicated she was cognitively intact.	M1210		

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M1210	Continued From page 4 Record review of the "Admission Record" revealed the facility admitted Resident # 2 on 7/31/2022 with a diagnosis of Encounter for Surgical Aftercare following Surgery on the Cardiovascular System. Record review of the Quarterly MDS with an ARD of 8/07/22, revealed Resident #2 had a BIMS score of 12, which indicated her cognition was moderately impaired. Room 314 On 9/12/22 at 4:35 PM, the SA observed white, dry patch spots around the air conditioning unit in the room. The front of the air conditioner does not have a covering. Room 323 On 9/12/22 at 4:45 PM, the SA observed a room that the facility used for storage and there were no residents residing in the room. There was a hole in the wall around the air conditioning unit and the sheet rock was crumbled. The SA was able to see the outside of the building through the hole, which was large enough to allow water to enter the building. Room 327 On 9/12/22 at 4:20 PM, the SA observed a white, dry wall that was marred and chipped in the room. The dry wall around the air conditioning unit was marred and patched. During an Interview on 9/13/22 at 09:00 AM, with the Maintenance Director and Assistant Director, they confirmed they were aware of the	M1210		

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environmental problems in the facility. The Maintenance Directors said they both started working for this facility in July and they have been trying to catch up with all the problems, however, "It's only two of them". The Director verified that the facility has had problems with flooding, and he has installed a pump to divert the water away from the front of the building. The water that had been coming into the walls had caused the sheet rock around the air conditioning units to break. He has been trying to use sealant and stucco around the units to prevent rainwater from coming in. There are several rooms in the facility that need to be painted

During an interview on 9/13/22 at 9:30 AM, with Certified Nursing Assistant (CNA)#1, revealed the facility has provided an educational in-service related to how to use the maintenance log at the nurse's station to record environmental concerns. She works on the Rehabilitation Unit and has not recorded any issues on the maintenance log because she is busy providing care to the residents and has not noticed the need for paint or the holes in the wall in the residents' rooms. CNA #1 confirmed that the facility floods every time it rains.

During an interview on 9/13/22 at 9:45 AM, with CNA #2, revealed she has been trained to document environmental issues on the maintenance log and she has previously used the logs to document identified concerns. CNA #2 said the facility floods when it rains, causing the air conditioning units, sheet rock, and paint to peel.

During an interview on 9/13/22 at 10:00 AM with CNA #3, he said he was trained to document environmental issues in the maintenance book,

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but he has no written anything in the book because he was busy providing resident care. CNA #3 said he has seen the facility flood in the residents' rooms several times and he thinks the sheet rock breaking off the wall around the air conditioning unit onto the floor because the water is not draining outside.

During an interview on 9/13/22 with Licensed Practical Nurse (LPN) #1, she said she documents any environmental issues in the maintenance book. She was aware of the holes in the wall, chipped paint, and the flooding in the building, and has documented it in the maintenance several times.

During an interview on 9/13/22 at 10:45 AM, with the Floor Technician (TECH), he said he has had to vacuum a lot of water in the facility due to flooding after it rains. He has noticed the walls are peeling around the air conditioning units, but he has not documented the issue in the maintenance book.

During an interview on 9/13/22 at 11:00 AM, with Housekeeper #2, she said she was told to document environmental problems in the maintenance log at the nurse's station. She was aware of the hole behind the door in Room 311 and has seen the chipped paint and holes in the walls on the Rehabilitation Unit. She thought the maintenance personnel knew about them and was going to get to them whenever they could.

Interview on 9/13/22 at 11:15 AM, with Housekeeper # 3, she said she has only been working for the facility for about a month and has fallen three (3) times attempting to mop up the water from the rain. Housekeeper #3 said she was told to record any environmental issues on

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M1210	Continued From page 7 the maintenance book at the nurse's station, but she has not documented anything in the book. Housekeeper #3 said she thought the maintenance department knew about the issues because they were there when she came to work for the facility. During an interview with the Director of Nursing (DON) on 9/13/22 at 11:30 AM, she confirmed the environmental issues should be documented in the Maintenance book at the nurse's station. She was aware of the holes in the walls, paint chipping, and flooding in the building and the maintenance department is working as fast as they can to repair the rooms. The DON said she told the staff to write everything down in the maintenance book and don't stop the Maintenance workers to do small projects because they have so much to do, they can't get it all done in a timely manner. During an interview with the Administrator on 9/13/22 at 12:00 PM, she confirmed she was aware of the environmental problems in the facility. She has advised the Maintenance Department to focus on the most serious issues like the flooding. There was a pump placed in the front of the rehabilitation gym to prevent flooding and she has gotten a quote for the placement of gutters.	M1210		